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Clinical use of a novel audio pillow with recorded hypnotherapy instructions and music for anxiolysis during dental implant surgery: a prospective study.

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A prospective, comparative study of a novel audio pillow with hypnosis text and relaxation music was conducted in 82 dental-implant surgery patients to relieve anxiety over a 6-month period. Visual analogue scales combined with the Aachen Dental Treatment Fear Inventory (AZI) questionnaire were used to quantify patients' subjective feelings of fear. Blood pressure, heart rate, and capillary oxygen partial pressure were measured before, during, and after surgery. The AZI scores decreased in the hypnotherapy group (n = 44) and increased slightly in the control group; scores were significantly different between the groups (p = .000). During surgery, the average diastolic blood pressure and heart rate decreased in the hypnotherapy group and increased in controls. Thus, this audio pillow with relaxation music showed anxiolytic effects in patients during dental implantation procedures.

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Comparison of conventional therapies for dentin hypersensitivity versus medical hypnosis.
This study compared the efficacy of conventional treatments for dentin hypersensitivity (DHS) and hypnotherapy. During a 1-month period at an urban practice in a service area of approximately 22,000 inhabitants, all patients were examined. A total of 102 individuals were included in the evaluation. Values of 186 teeth were analyzed. The comparison of the different treatment methods (desensitizer, fluoridation, and hypnotherapy) did not show significant differences in success rates. However, a noticeable difference was observed in terms of onset and duration of effect. For both desensitizer and hypnotherapy treatments, onset of effect was very rapid. Compared to the other methods studied, hypnotherapy effects had the longest duration. In conclusion, hypnotherapy was as effective as other methods in the treatment of DHS.

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Biopsychosocial correlations in patients with chronic oro-facial pain. Part II. Experiences of pain and dramatic events before the 16th year of life.

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Before the sixteenth year of life, biopsychosocial influences such as self-experienced and observed accidents/illnesses, adverse medical/dental treatments, dangerous events and self-experienced or observed force seem to affect the manifestation of chronic pain in the oro-facial area in the forms of temporomandibular disorder (TMD) and psychogenic denture-intolerance (PDI)/somatoform oro-facial pain (SOP). We evaluated the occurrence of these types of events before the age of 16 years in 50 TMD patients, 55 PDI/SOP
patients and 55 randomly selected pain-free control group (CG) using the medical questionnaire 'Physical well-being and traumatic experiences (PTE). A separate dental questionnaire determined the effects of previous experiences of pain or force on the emotional self-assessment of the patients (pain localization and body feeling). The TMD group was significantly more likely to have experienced an accident and an illness before the age of 16 years than were the other two groups (PDI/SOP and CG) (P < 0.039). Temporomandibular disorder and PDI/SOP patients suffered frequent backaches significantly more than CG patients (P < 0.028). The PDI/SOP patients were least likely to report having felt threatened before or after the age of 16 years (P < 0.003) compared with the PDI/SOP and CG group. Sociodemographic parameters, experiencing an accident, previous medical incidents, experiences of force and emotional self-assessment influence the biopsychosocial dynamics that directly influence oro-facial symptoms with psychogenic components. Similar to medical history, age seems to play a decisive role in the manifestation of oro-facial psychic symptoms.

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Oral health-related quality of life in partially edentulous patients: assessments before and after implant therapy.

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OBJECTIVES: Little is known about oral health-related quality of life (OHRQoL) for partially edentulous patients seeking implant therapy. We investigated preoperative and postoperative OHRQoL to determine the impact of prosthodontic treatments.

METHODS: From January 2006 to July 2007, 343 patients (219 in the partially edentulous, "study group"; 124 in the fully dentate, "control group") were assessed for OHRQoL with a German version of the Oral Health Impact Profile (OHIP-G 21, range 0-84). Assessments were made at the preoperative evaluation and
after prosthodontic treatments.

RESULTS: Median OHIP scores were 17.1 and 3.4 for the study and control groups, respectively (p<0.01). After prosthodontic treatment, the median OHIP score of the study group decreased from 17.1 to 5.4 (p<0.01). The types of problems reported pre- and post-treatment were substantially different.

CONCLUSIONS: Preoperative assessment of OHRQoL identified clear differences for partially edentulous compared to fully dentate patients. The implant therapy had a positive effect on the OHRQoL.

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Clinical study on the correlation between psychogenic dental prosthesis incompatibility, oral stereognosis, and the psychologic diagnostic tools SCL-90-R and CES-D.

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PURPOSE: The objective of this study was to use an oral stereognosis test to evaluate possible intraoral/sensorimotor causes in patients with a psychologic diagnosis of psychogenic prosthesis incompatibility, and to evaluate possible correlations between oral stereognosis and the psychologic diagnostic tools Symptom Checklist-90-R (SCL-90-R) and Center of Epidemiological Studies Depression Scale (CES-D).

MATERIALS AND METHODS: The study cohort comprised 83 patients with complete dentures fabricated according to a standardized protocol. Twelve patients diagnosed with psychogenic prosthesis incompatibility (11 women, 1 man) using the SCL-90-R and CES-D scales in a previous study and a group of 24 randomly selected control subjects (14 women, 10 men) underwent an oral stereognosis test with 10 neutral-tasting plastic test specimens with a maximum edge length of 8 mm in 2 test cycles.

RESULTS: The results revealed no significant differences in oral stereognostic
ability between patients with diagnosed psychogenic dental prosthesis incompatibility and the control patients. The patients in the test group expressed clear dissatisfaction with their dentures. No correlation was found between oral stereognostic ability and the SCL-90-R or CES-D values.

CONCLUSIONS: This study is the first to use oral stereognosis tests for patients with psychologically diagnosed psychogenic dental prosthesis incompatibility. The diagnosis of psychogenic prosthesis incompatibility by the SCL-90-R and CES-D scales is affirmed by the lack of correlations between the functional/anatomic aspects of oral stereognostic ability, psychologic diagnostic tools, and the clinical picture of psychogenic prosthesis incompatibility. Thus, psychogenic prosthesis incompatibility can be classified more explicitly as a psychosomatic disorder.

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Pilot study on the psychologic evaluation of prosthesis incompatibility using the SCL-90-R scale and the CES-D scale.

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PURPOSE: The aim of this pilot study was to evaluate and determine psychogenic aspects of prosthesis incompatibility by psychologic tests that define the (psychogenic) prosthesis incompatibility as a psychologic disorder. The patients' complaints with the restorations included taste disorders, odynophagia, pain sensations, and functional and esthetic dissatisfaction.

MATERIALS AND METHODS: The study cohort comprised 83 patients with complete dentures fabricated according to a standardized protocol. A dental history questionnaire was used to evaluate whether the patients had adapted to their dentures 6 months after incorporation. Twelve patients with suspected psychogenic prosthesis incompatibility and a group of 24 randomly selected control subjects were evaluated by application of the psychologic tests Symptom Checklist-90-R
(SCL-90-R) and the Center of Epidemiological Studies Depression Scale (CES-D).

RESULTS: When compared with the control group, patients with suspected psychogenic dental prosthesis incompatibility showed statistically significant differences in the CES-D cumulative values (P = .015) and the SCL-90-R values Global Severity Index (P = .024) and Positive Symptom Distress Index (P = .049).

CONCLUSION: This was the first documented study to use the SCL-90-R and CES-D scales on patients with suspected psychogenic dental prosthesis incompatibility with nonadaptation 6 months after incorporation. Adaptation problems were ruled out as a possible cause. Using the SCL-90-R and CES-D, it was possible to make a reliable initial diagnosis of the psychosomatic clinical situation regarding psychogenic prosthesis incompatibility. The results have direct implications on socioeconomic and forensic consequences for diagnosis and treatment by a dental clinician.

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Neurophysiologic and long-term effects of clinical hypnosis in oral and maxillofacial treatment—a comparative interdisciplinary clinical study.


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This prospective comparative clinical study evaluated the effectiveness of clinical hypnosis and its long-term effect in oral and maxillofacial treatment. A total of 45 highly anxious and nonanxious subjects were evaluated by subjective experience and objective parameters. Parameters were EEG, ECG, heart rate, blood pressure, blood oxygen saturation, respiration rate, salivary cortisol concentration, and body temperature. During and subsequent to the operative treatment, hypnosis led to a significant reduction of systolic blood pressure, and respiration rate and to significant changes in the EEG. The subjective values of the parameters evaluated existing anxiety mechanisms and patterns and possible
strategies to control them, whereas the objective parameters proved the effectiveness of hypnosis and its long-term effect.

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Rapid induction of hypnosis by finger elongation: a brief communication.

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This clinical pilot study on finger elongation for induction of hypnosis attempts to determine whether the observed response is a hypnotic phenomenon or a simple physiologic reaction. Sixteen volunteers participated in the 5-phase study, which measured relative and absolute changes in the length of each finger prior to and after each phase. A distinctive elongation was statistically significant for the hypnosis condition. In addition, findings suggest changes in the metacarpus. Further investigation is indicated to shed light on this apparent phenomenon.

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Dental anxiety--an epidemiological study on its clinical correlation and effects on oral health.

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Pronounced dental anxiety could lead to avoidance strategies to evade dental
visits. The aim of the present epidemiological study was to investigate the prevalence and related oral disease patterns of dental anxiety in young adult male soldiers. Therefore, the intensity and frequency of dental anxiety are presented and the correlation with oral clinical findings are evaluated. Three hundred seventy-four soldiers who underwent a compulsory dental check-up were randomly assigned to this study. Psychological parameters were collected based on a protocol integrating the Dental Anxiety Scale (DAS) and the Gatchell Fear Scale (GaFS). Patient-based measures included D3,4MF-scores for dental status and the Community Periodontal Index of Treatment Need (CPITN) for periodontal status. Thirty-two individuals (8.6%) showed DAS-scores of 13 or 14 (anxious), while 4.6% had a DAS-score $\geq 15$ (highly anxious/phobic). Highest DAS-values were measured among patients' aged 19-29 ($n = 262$). DMFS-values of anxious and less anxious patients showed only minor differences. However, anxious patients had significantly more carious lesions ($P < 0.001$). CPITN periodontal values showed no significant differences between both groups. 89.2% of less anxious individuals and 79.6% of anxious patients went for regular dental check-ups. Thus, every tenth patient was considered to have high dental anxiety. Anxiety results in avoidance behaviour, which can only be discovered upon compulsory examinations and which is associated with higher caries morbidity and need for oral rehabilitation. As anxiety has a direct influence on oral health, it should be detected and accounted for in a treatment concept integrating dental and cognitive-behavioural therapeutic approaches.

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It was hypothesized that dental anxiety, which leads to neurophysiologic alterations in heart rate, respiratory rate and blood pressure prior, during and subsequent to dental treatment, can be influenced by medical hypnosis. We report the positive impact from non-invasive hypno-sedation during dental implant surgery on a 54-year-old female patient who experienced neurophysiologic reactions as a result of the psychosomatic process of dental anxiety (dental anxiety scale value = 13). The neurophysiologic changes during dental surgery performed with and without hypnosis were compared after the patient underwent the same surgical treatment protocol. This case report was part of a study designed to evaluate hypnosis as a non-invasive therapy for dental-anxious patients over six sessions using subjective experience and objective parameters, which included electroencephalogram, electrocardiogram, heart rate, blood pressure, oxygen saturation of the blood, respiration rate, salivary cortisol concentration and body temperature.

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A long-term therapeutic treatment for patients with a severe gag reflex.

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"Hypnopuncture," a combination treatment of hypnosis and acupuncture, provides a therapeutic treatment plan for long-term therapy for patients with a distinctive gag reflex. The treatment is applied independently of the cause. In cases of emergency treatment in dentistry, the immediate compliance of a patient is of utmost importance. The long-term goal of any therapeutic measure is control of the gag reflex. A new treatment protocol is illustrated in the case of a 50-year-old patient with a severe gag reflex. After only 5 visits, dental treatment could be conducted without any auxiliary means. Hypnosis is applied in the form of hypnosedation (not as psychotherapy), while stereognosis occupies a central position for desensitization.
"Hypnopuncture"--a dental-emergency treatment concept for patients with a distinctive gag reflex.

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The present case report describes a newly developed dental treatment concept for patients with a distinctive gag reflex. "Hypnopuncture" is a combination therapy of hypnosis and acupuncture. Its simple, fast, and effective application autonomous of the cause makes it a valuable tool for dental-emergency treatment procedures. Physiologic and psychological aspects of gagging are influenced at the same time. The protocol is illustrated in the case of a 76-year-old patient with a severe gag reflex who was successfully treated by this combination approach. Necessary and effective therapeutic measures from both acupuncture and hypnosis are portrayed.