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Cover: Chlamydia trachomatis bacteria proliferate inside a human cell. The bacteria occupy the mottled region in the photo; the darker ovals are the cell nuclei. Chlamydia, the most common sexually transmitted disease in the United States, can progress from the cervix into the fallopian tubes, causing severe inflammation and scarring that may lead to ectopic pregnancy or infertility. Scientists are trying to learn how this "silent" infection can wreak such reproductive havoc, and how to gauge the risk of fallopian damage in women who have had the disease. (Photo: Richard S. Stephens)



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Letters

'Breakthrough' challenged

"Tooth-wear gauge opens up dental research" (SN: 2/16/91, p.102) addresses an important investigative method, described by its developer as a "breakthrough" that will stimulate a wide range of dental research.

However, the process is not a "breakthrough," since the technique is relatively simple and has been available for a number of years. Moreover, you refer to the use of powerful scanning electron microscopes in detecting tiny defects in tooth enamel, but these types of defects can readily be evaluated quantitatively with conventional scanning electron microscopy at magnification levels as low as 200X.

You discuss human enamel wear rates as high as 50 microns per year. Such values are totally unrealistic and would result in total loss of enamel from the occlusal surface by age 40 to 50. Generalized wear of human teeth is probably closer to 3 to 5 microns per year.

Also, it can be intrepreted from the article that the investigators acid-etched the tooth enamel to morphologically identify individual enamel rods. You suggest that the rods could be used to monitor wear rates since they are of fixed dimensions. Unfortunately, such a process would weaken the enamel surface considerably, resulting in reduced resistance to wear. Morphological defects should be placed mechanically or by other means without affecting the soundness of enamel.

Karl F. Leinfelder Volker Professor of Clinical Dentistry Director, Biomaterials Clinical Research University of Alabama School of Dentistry Birmingham, Ala.

Researchers have used scanning electron microscopes to study teeth for some time, but the new method for estimating tooth wear from microscopic marks on enamel indeed represents an important breakthrough, insists Mark Teaford of Johns Hopkins University in Baltimore. Teaford's studies use magnification levels similar to the 200× you cite. The article refers to 50 microns as the maximum annual wear rate for human enamel, not the norm. Moreover, Teaford's approach involves only counting the pits and scratches on enamel, not acid-etching.

B. Bower

Chancy statistics

The data reported in "Fetal repair: Safe for mom, chancy for child" (SN: 2/16/91, p.102) are much less reassuring for mothers than your article suggests. A finding of zero apparent maternal complications in 17 operations means that the actual rate of such complications could be as high as 20 percent (with 95 percent confidence, the usual confidence level used in these types of statistical estimates). On the other hand, the actual rate might indeed be close to zero. Additional cases are needed to narrow these confidence limits.

Results from small samples are notoriously easy to misinterpret if they are not subjected to even the most rudimentary statistical tests and critical comparisons. Given the possibility that an adverse outcome might occur as often as one time in five, few of us would be likely to call such a procedure safe, although we might choose to undergo it anyway.

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