AN INTEGRAL COMPONENT OF THE TREATMENT OF PAIN AND INFLAMMATION IN THE ORAL CAVITY IN 60 COUNTRIES WORLDWIDE!1

- JAWS FRACTURES3
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LOCAL ANESTHETIC AND ANTI-INFLAMMATORY EFFECT1

SUMMARY OF PRODUCT CHARACTERISTICS
NAME OF THE MEDICINAL PRODUCT: Tantum Verde 0.15% mouthwash, QUALITATIVE AND QUANTITATIVE COMPOSITION. Each 100 ml contains: active ingredient: benzylamidine hydrochloride 0.15 g (equivalent to 0.134 g of benzylamine).
Therapeutic indications: Treatment of symptoms such as irritation/inflammation including those associated with pain in the oropharyngeal cavity (e.g. gingivitis, stomatitis and pharyngitis), including those resulting from conservative or extracting dental therapy. Protocol and method of administration: Pour 15 ml of Tantum Verde mouthwash into the measuring cup. 4-3 times per day, using 5-10 ml of solution. Take 5-10 ml of water to the graduated cup. Do not exceed the recommended dosage. Contraindications: Hypersensitivity to benzylamidine or any other excipient. PHARMACOLOGICAL PROPERTIES. Pharmacodynamic properties. Pharmacotherapeutic group: Systemic drugs: other agents for local oral treatment. ATC code: A10AD01. Clinical studies demonstrated that benzylamidine is effective in relieving symptoms from local irritations of the mouth and pharynx. In addition, benzylamidine possesses a moderate local anesthetic effect. Pharmacokinetic properties. Absorption. Absorption through the oropharyngeal mucosa is demonstrated by the presence of measurable quantities of benzylamine in human plasma. These levels are insufficient to produce systemic effects. Distribution. When applied locally, benzylamidine has been shown to accumulate in inflamed tissues where it reaches effective concentrations because of its capacity to penetrate the epithelial lining. Information about medicines. Information for health care professionals for use in professional activities.

1. Инструкция для медицинского использования анестетика, Тантум Верде®, разработанной для российского рынка, зарегистрирована Министерством здравоохранения Российской Федерации за № 636 от 01.10.2015
5. Clinical and CT images were courtesy of: Department of Oral & Maxillofacial Surgery, PHEI Kyiv Medical University, Kyiv, Ukraine. O. Y. M. ("SCIENCE--Scientific Center of Dentistry & Ultrasound Surgery") Kyiv, Ukraine

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04119, Kiev, Melnikova str. 83D, of. 404.
Tel: (044) 538-01-26
Fax: (044) 538-01-27
About the Journal: Aims and Scope

Official Title
Journal of Diagnostics and Treatment of Oral and Maxillofacial Pathology

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Acronym
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Aims & Scope
This is a monthly peer-reviewed oral and maxillofacial surgery journal focused on: microvascular and jaw reconstructive surgery, dental implants, salivary gland tumors/diseases, TMJ lesions, virtual surgical planning, implementation of ultrasonography into the practice of oral and maxillofacial surgeons.

Editorial Board (EB) Composition
• EB shows significant geographic diversity representing 30 opinion leaders from 13 countries: Brazil, Canada, Colombia, Greece, Hong Kong (SAR, China), India, Israel, Italy, Slovak Republic, Spain, Ukraine, United Arab Emirates, and United States.
• The majority of the EB Members have a discernible publication history in Scopus, Web of Science, and journals with a high impact factor.
• The publication records of all EB members are consistent with the stated scope and published content of the journal.
• The journal has a several full-time professional editors.
• Gender distribution of the editors: 10% women, 90% men, 0% non-binary/other, and 0% prefer not to disclose.

Frequency
12 issues a year (from January 2020)

Publication History
2017: 4 issues a year
2018: 4 issues a year
2019: 10 issues a year
From 2020: 12 issues a year

Publishing Model
Journal of Diagnostics and Treatment of Oral and Maxillofacial Pathology is a fully online-only open access and peer-reviewed publication.

Type of Peer Review
The journal employs “double blind” reviewing.

Article Publishing Charge (APC)
The APC in this journal is US $500 and US $250 (excluding taxes) depending on the article's type. Details at website: dtjournal.org.

13 Types of Articles Currently Published by the Journal
Editorials/Guest Editorials/Post Scriptum Editorials, Images, Case Reports/Case Series, Original Articles, Review Articles, Discussions, Paper Scans (synonyms: Review of Articles, Literature Scan), Book Scans (synonyms: Book Reviews), Letters to the Editor (synonyms: Letters), and Viewpoints.

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Address: 4-A Profesora Pidvysotskoho Street, Kyiv 01103, Ukraine.
Tel., fax: +38 044 528 35 17.
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**Composition:**

*active substance:* benzydamine hydrochloride;

100 mL of solution contain benzydamine hydrochloride 0.15 g;

*excipients:* ethanol 96%, glycerol, methyl parahydroxybenzoate (E 218), flavor (menthol), saccharin, sodium hydrocarbonate, Polysorbate 20, Quinoline Yellow (E 104), Patent Blue V (E 131), purified water.

**Dosage form.** Oromucosal solution.

**Basic physical and chemical properties:** A clear green liquid with a typical mint flavor.

**Pharmacotherapeutic group.** Dental preparations. Other agents for local oral treatment.

ATC code: A01A D02.

**Pharmacological properties.**

**Pharmacodynamics.**

Benzydamine is a non-steroidal anti-inflammatory drug (NSAID) with analgesic and antiexudative properties.

Clinical studies have shown that benzydamine is effective in the relief of symptoms accompanying localized irritation conditions of the oral cavity and pharynx. Moreover, benzydamine has anti-inflammatory and local analgesic properties, and also exerts a local anesthetic effect on the oral mucosa.

**Pharmacokinetics.**

Absorption through the oral and pharyngeal mucosa has been proven by the presence of measurable quantities of benzydamine in human plasma. However, they are insufficient to produce any systemic pharmacological effect. The excretion occurs mainly in urine, mostly as inactive metabolites or conjugated compounds.

When applied locally, benzydamine has been shown to cumulate in inflamed tissues in an effective concentration due to its ability to permeate through the mucous membrane.

**Clinical particulars.**

**Indications.**

Symptomatic treatment of oropharyngeal irritation and inflammation; to relieve pain caused by gingivitis, stomatitis, pharyngitis; in dentistry after tooth extraction or as a preventive measure.

**Contraindications.**

Hypersensitivity to the active substance or to any other ingredients of the product.

**Interaction with other medicinal products and other types of interaction.**

No drug interaction studies have been performed.

**Warnings and precautions.**

If sensitivity develops with long-term use, the treatment should be discontinued and a doctor should be consulted to get appropriate treatment.

In some patients, buccal/pharyngeal ulceration may be caused by severe pathological processes. Therefore, the patients, whose symptoms worsen or do not improve within 3 days or who appear feverish or develop other symptoms, should seek advice of a physician or a dentist, as appropriate.

Benzydamine is not recommended for use in patients hypersensitive to acetylsalicylic acid or other non-steroidal anti-inflammatory drugs (NSAIDs).

The product can trigger bronchospasm in patients suffering from or with a history of asthma. Such patients should be warned of this.

For athletes: the use of medicinal products containing ethyl alcohol might result in positive antidoping tests considering the limits established by some sports federations.
Use during pregnancy or breast-feeding

No adequate data are currently available on the use of benzydamine in pregnant and breastfeeding women. Excretion of the product into breast milk has not been studied. The findings of animal studies are insufficient to make any conclusions about the effects of this product during pregnancy and lactation.

The potential risk for humans is unknown.

TANTUM VERDE should not be used during pregnancy or breast-feeding.

Effects on reaction time when driving or using machines

When used in recommended doses, the product does not produce any effect on the ability to drive and operate machinery.

Method of administration and doses.

Pour 15 mL of TANTUM VERDE solution from the bottle into the measuring cup and gargle with undiluted or diluted product (15 mL of the measured solution can be diluted with 15 mL of water). Gargle 2 or 3 times daily. Do not exceed the recommended dose.

Children.

The product should not be used in children under 12 years due to a possibility of ingestion of the solution when gargling.

Overdosage.

No overdose has been reported with benzydamine when used locally. However, it is known that benzydamine, when ingested in high doses (hundreds times higher than those possible with this dosage form), especially in children, can cause agitation, convulsions, tremor, nausea, increased sweating, ataxia, and vomiting. Such acute overdose requires immediate gastric lavage, treatment of fluid/salt imbalance, symptomatic treatment, and adequate hydration.

Adverse reactions.

Within each frequency group, the undesirable effects are presented in order of their decreasing seriousness.

Adverse reactions are classified according to their frequency: very common (≥ 1/10); common (≥ 1/100 to <1/10); uncommon (≥ 1/1,000 to <1/100); rare (≥ 1/10,000 to <1/1,000); very rare (<1/10,000); frequency unknown (cannot be estimated from the available data).

Gastrointestinal disorders: rare – burning mouth, dry mouth; unknown – oral hypesthesia, nausea, vomiting, tongue edema and discoloration, dysgeusia.

Immune system disorders: rare – hypersensitivity reaction, unknown - anaphylactic reaction.

Respiratory, thoracic and mediastinal disorders: very rare – laryngospasm; unknown – bronchospasm.

Skin and subcutaneous tissue disorders: uncommon – photosensitivity; very rare – angioedema; unknown – rash, pruritus, urticaria.

Nervous system disorders: unknown – dizziness, headache.

TANTUM VERDE contains methyl parahydroxybenzoate, which can cause allergic reactions (including delayed-type reactions).

Shelf life. 4 years.

Storage conditions.

Do not store above 25°C. Keep out of reach of children.

Packaging.

120 mL of solution in a bottle with a measuring cup; 1 bottle per cardboard box.

Dispensing category.

Over-the-counter medicinal product.

Manufacturer.


Location of the manufacturer and its business address.

Via Vecchia del Pinocchio, 22 – 60100 Ancona (AN), Italy.

Date of the last revision of the text.

September 26, 2018.

Information leaflet is APPROVED by Order of the

Ministry of Health of Ukraine

No. 636 dated 01.10.2015

Registration Certificate

No. UA/3920/01/01
FIGURE. Evangelos G. Kilipiris, MD, DMD from the National Institute of Children's Diseases and Faculty of Medicine at Comenius University, Bratislava, Slovak Republic. A kind support of Dr. Kilipiris during the 5 years at the position of Director, Journal Development Department helped our journal to move forward and to evolve. An honorary plaque was presented to him on behalf of the Chief Editor with words “To a Founding Director, Author of Multiple Articles and Reviews, Great Thanks and Appreciation.” Photo was taken on November 23, 2021.
"No Abstract Available." Maybe It’s a Time to Integrate Abstracts into Editorials?
Oleksii O. Tymofieiev & Ievgen I. Fesenko

Journal’s cover image (virtual surgical planning for a segmental mandibular reconstruction with fibula transplant) is courtesy of Rui P. Fernandes, MD, DMD, FACS, FRCS.
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EDITORIAL

“No Abstract Available.” Maybe It’s a Time to Integrate Abstracts into Editorials?

Oleksii O. Tymofieiev & Ievgen I. Fesenko

ABSTRACT

Abstract of the peer-reviewed article is a short description of its main sections and simultaneously with the title is the most visible part of the paper. Articles of such types as case reports, case series, original research, review, essays, and many other types have their own abstract. Many, except of editorials. Considering the fact that as of 2023, the science unfortunately has been replaced by the pursuit of citations, the insufficient number of citations of editorial articles may be caused by the lack of an open abstract in them. We oppose discrimination of editorials. Editorial articles are constantly evolving and the number of editorials in which the number of pages reaches 9 is increasing. And an article with so many pages should have its own abstract. We demand that editorials be given the right to have their abstracts. The problem of the absence of an abstract in editorials is like a coin—it has two sides. On the one side, scientist, or editor of other journal, especially in the case of closed (i.e., paid) editorial, may not understand from the editorial title alone the details of what the article is about and whether this article can be useful in their research, practice, or editorial office work. On the other side, the article lacks visitors and, as a result, its authors do not receive dividends in the form of citations. Let’s not forget about the publishers, who in turn receive less revenue in the case of closed editorials, which in turn does not allow reinvesting in technological innovations of journals. In this editorial, we analyze and present the advantages of integrating abstracts into such an important type of article as editorial.
After publication, the abstract is crucial for the success of your paper.
—Daniela Ruffell (2018)

Abstract or summary is a primary source of the information for the reader about any peer-reviewed article. About any article, but not about editorials. Someone will say that this type of articles is too short to include the abstracts. And partly these opinions are seemingly true because some editorials have a sum of words comparable with that of a single abstract of a large research or review-type article. What actually happens is that the number of pages in editorial-type articles varies from one or even half of a page to nine.

It doesn't matter how many pages the editorial takes up, because it can contain extremely important data about the evolution/discontinuation/ceasing of the journal, specialty, pivotal decisions of the editorial board, summaries of the contents of this specific issue of the journal, and much more.

When the non-editorial article is paid to read, it still has the abstract and thus carries basic information for a potential reader, scientist and person who could cite this article in their works. The importance of the abstract is also confirmed by the fact that in the case of non-English-language articles, journals require authors to prepare a translation of the article title and abstract into English as a language of global science. And if there is no abstract in article like editorial, then a person cannot determine by just one title whether a scientist needs to pay for this paper or even just go to the journal's website – that is, take additional steps and so be overloaded with the scientific work of academic workers.

The abstracts could be short, counting 57 words or even less (49 words) or long, counting 283 words. An abstract is always a part of open information, no matter it belongs to an open access article or to an article with the possibility of access for payment. Editors are emphasizing that a good abstract explains the aims of the research, how these were met, and the main findings.

The general consensus is that it [abstract] should be 200–300 words in length.
—Ketcham and colleagues (2010)

Multiple papers describe how to prepare the perfect abstract to the different types of articles. Different, except of editorials. It is most interesting to see and read editorials about how to write the abstracts for research articles, and at the same time not have the abstracts in these editorials themselves.

In our opinion, the abstract in such articles as an editorial can have a couple of sentences. But all the same, it will be more extended and informative than just an article without any abstract.

Moreover, if the paid article does have an abstract and it has taken an interest of a scientist, this increases the probability that the scientist will pay a fee for accessing and downloading the article.

The abstract is the vehicle used to decide if the study is of sufficient interest to go to the effort of obtaining the full paper...

And more disappointing is when a database, like PubMed® or Scopus®, contains the title of the article, but neither its summary/abstract nor a direct link to the article itself. Such cases disappoint the seeker and decrease the probability that reader will pay to read that closed paper. And articles with abstracts, like case reports, in same databases show how important to include the abstract to facilitate the researcher's search.

Crossref Metadata Manager has likewise an option to include an article’s abstract. Metadata Manager website demonstrates the textbox for abstract of each article which received such an important tool as a digital object identifier (DOI). This fact is another reason for integrating abstracts into editorial articles.

Figure 4 demonstrates the laptop screenshots from the website of the Italian Journal of Maxillofacial Surgery with the editorial article without abstract and a case report paper article with it. Unfortunately, the absence of the abstract completely camouflages the essence of the editorial as an article.

It is true that the work of some peer-review journals may follow the dictates of publishers and they may limit editors in the number of pages for editorials. However, editors should insist on any publishing and editorial steps that can increase the number of visits to the journal website and article citations.

We think that integration of abstracts to such articles as editorials will contribute to increasing the openness of information in various important databases.
FIGURE 1. Smartphone screenshot from the PubMed® website demonstrates absence of abstract (“No abstract available”) in article of the editorial type.24
FIGURE 2. Smartphone screenshots from the Scopus® website compares the editorial article without abstract (A) and case report article with it (B). (Figure 2 continued on the next page.)
Congenital epulis in a newborn

Kang, Min-Jun; Kang, Sang-Hoon

*Department of Oral and Maxillofacial Surgery, National Health Insurance Service, Ilsan Hospital, Goyang, South Korea

Abstract

Congenital epulis (CE) is an extremely rare benign tumor of the gingiva that is found on the alveolar ridge of newborns, and the main treatment option is simple excision. Postoperative prognosis is very good, and spontaneous regression may occur despite incomplete excision. This report presented a rare case of CE and its healing process after surgery under local anesthesia. The treatment plan was decided upon through consultation between a medical team and the patient's family, with surgical excision for the main lesion, which benefited from surgery, and follow-up for a very small-sized lesion, which was thought to be appropriate for a newborn. No recurrence was found after its removal, and favorable healing was observed. © 2022 The Korean Association of Oral and Maxillofacial Surgeons.

Author keywords

Congenital epulis, Newborn

Indexed keywords

Newborn

SciVal Topics

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References (14)

FIGURE 2 (continued). Smartphone screenshots from the Scopus® website compares the editorial article without abstract (A) and case report article with it (B).
FIGURE 3. Smartphone screenshot from the Crossref Metadata Manager website demonstrates the textbox for the abstracts of each article which received digital object identifier (DOI).
FIGURE 4. Laptop screenshots from the website of the *Italian Journal of Maxillofacial Surgery* compares the editorial article\(^1\) without abstract (A, B) and a case report paper article\(^2\) with it (C, D). (Figure 4 continued on the next page.)
FIGURE 4 (continued). Laptop screenshots from the website of the Italian Journal of Maxillofacial Surgery compares the editorial article8 without abstract (A, B) and a case report paper article28 with it (C, D). (Figure 4 continued on the next page.)
FIGURE 4 (continued). Laptop screenshots from the website of the Italian Journal of Maxillofacial Surgery compares the editorial article\(^8\) without abstract (A, B) and a case report paper article\(^2\) with it (C, D). (Figure 4 continued on the next page.)
FIGURE 4 (continued). Laptop screenshots from the website of the Italian Journal of Maxillofacial Surgery compares the editorial article without abstract (A, B) and a case report paper article with it (C, D).
Here is a list of the benefits of such integration:

1. Reduction of time to search for information.
2. Increasing the probability of citation.
3. Increasing the productivity of scientists.
4. It will help peer-reviewed journal to grow its revenue in case of receiving payment from readers for access to the articles.

Also, the integration of a abstracts may be appropriate in other abstractless articles, for example in the perspective-type articles. So, this is just a humble analysis. But it is possible that the editorial teams of the peer-reviewed journals will find our opinion interesting or even important for the development of the journals and surgical science. Anyway, starting this very issue of our open access Journal we are happy to make the editorials a more complete paper, initiating the tradition of publishing the editorials of all types (editorials, guest editorial, and postscript editorials) with abstracts.


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20. Weissmann G. Writing science: the abstract is poetry, the paper is prose. FASEB J 2008;22(8):2601–4. https://doi.org/10.1096/fj.08-0801ufm


