



100 years of chalky teeth, 1920 - 2020

Demarcated Opacity Disorders: A draft classification

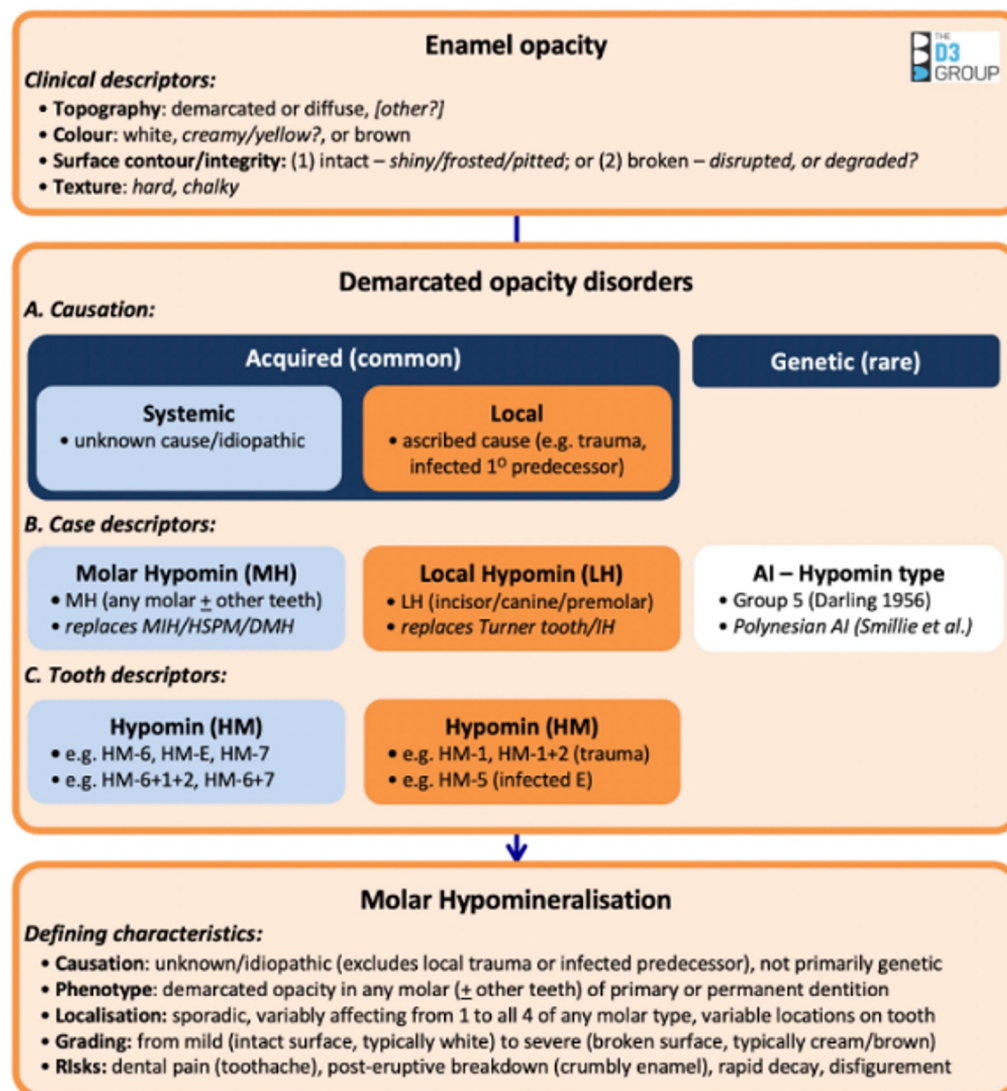


FIGURE 2 | Charting 100 years of learning about demarcated opacity disorders. This infographic depicts key aspects of enamel opacities and MH discussed in the text – some facets still requiring clinico-scientific consensus are italicised. The layout encourages researchers to think “inside-out” – from tooth-level pathology to whole-dentition phenotype – rather than starting with case descriptors such as MH. Consequently, MH and other manifestations of demarcated opacities (e.g., Turner teeth) are logically denominated together as “demarcated opacity disorders,” thereby encouraging consideration of how disparate causal events (ascribed and idiopathic) can trigger the same dental pathology (11). Researchers’ needs to assign hypomineralisation status to individual teeth in both dentitions, and to record combinatorial phenotypes, are also embraced. HSPM, hypomineralised second primary molar; DMH, deciduous molar hypomineralisation; IH, incisor hypomineralisation; HM-6, hypomineralised first adult molar; HM-E, hypomineralised second baby molar; HM-7, hypomineralised second adult molar; HM-1+2, hypomineralised first and second adult incisors; HM-5, hypomineralised second premolar. Taken from a D3G working document (Hubbard, unpublished) with permission.

Source

100 years of Chalky Teeth Research: From pioneering histopathology to social good.
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