Critically Appraised Topic (CAT)

Project Team:
6A-3
Project Team Participants:
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Clinical Question:
Do calcium channel blockers impact gingival hyperplasia and treatment outcomes?
PICO Format:
P:
Patient who has hypertension
l:
Taking calcium channel blockers to control hypertension
C:
Not using calcium channel blockers via switching from calcium channel blockers to another
medication to control hypertension
0:
Gingival hyperplasia control
PICO Formatted Question:
Can gingival hyperplasia be well controlled in patients who are taking calcium channel
blockers for hypertension?
Clinical Bottom Line:
Article 1 – Is dental plaque the only etiological factor in Amlodipine induced gingival
growth? A systematic review of evidence.
Calcium channel blockers are the most common antihypertensive agents prescribed (37%).
Amlodipine is used alone or in combination. Usually require lifelong administration and a
common side effect is gingival overgrowth.
Date(s) of Search:
Click here to enter text.
Database(s) Used:
Click here to enter text.
Search Strategy/Keywords:
Click here to enter text.
MESH terms used:
Click here to enter text.
Article(s) Cited:
Click here to enter text.
Study Design(s):
Click here to enter text.

Reason for Article Selection:
Click here to enter text.
Article(s) Synopsis:
Click here to enter text.
Levels of Evidence: (For Therapy/Prevention, Etiology/Harm)
See http://www.cebm.net/index.aspx?o=1025
☐ 1a — Clinical Practice Guideline, Meta-Analysis, Systematic Review of Randomized Control
Trials (RCTs)
□ 1b – Individual RCT
☐ 2a – Systematic Review of Cohort Studies
□ 2b – Individual Cohort Study
☐ 3 – Cross-sectional Studies, Ecologic Studies, "Outcomes" Research
☐ 4a – Systematic Review of Case Control Studies
☐ 4b — Individual Case Control Study
☐ 5 – Case Series, Case Reports
☐ 6 – Expert Opinion without explicit critical appraisal, Narrative Review
□ 7 – Animal Research
□ 8 – In Vitro Research
Strength of Recommendation Taxonomy (SORT) For Guidelines and Systematic Reviews
See article J Evid Base Dent Pract 2007;147-150
☐ A – Consistent, good quality patient oriented evidence
☐ B – Inconsistent or limited quality patient oriented evidence
\square C – Consensus, disease oriented evidence, usual practice, expert opinion, or case series for
studies of diagnosis, treatment, prevention, or screening
Conclusion(s):
Click here to enter text.