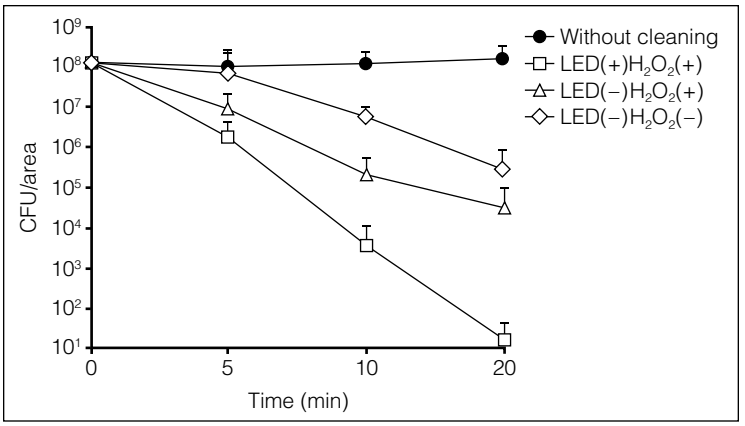

Fig 4 Denture-cleaning effect of the device in clinical use. Even in the case of LED(–)H_2O_2(–), the targets were irradiated by ultrasound, so the bacteria likely detached from the removable dental prosthesis and were somewhat killed by the increased temperature of the solutions. Hydroxyl radicals generated in LED(+)H_2O_2(+) in combination with H_2O_2 could most effectively decrease the number of bacteria with an approximate 7-log reduction. Each value represents the mean of 10 specimens with standard deviations.

Conclusion

This novel denture-cleaning system utilizing hydroxy radicals generated by photolysis of H_2O_2 was proven to be effective against microorganisms in denture plaque.

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Literature Abstract

Coffee intake and oral/esophageal cancer: Follow-up of 389,624 Norwegian men and women 40–45 years

This prospective study was conducted to investigate the effect of coffee on oral/esophageal cancer. Participants (n = 389,624) in the Norway national survey program were followed up with regarding their cancer status for 15 years. Participants' daily coffee intakes were categorized as 0 or < 1 cup, 1 to 4 cups, 5 to 8 cups, or 9+ cups. Participants' cancer statuses were obtained from the Cancer Registry of Norway. Squamous cell carcinoma in the buccal cavity or esophagus was considered the end point of this study. Cox proportional hazard regressions were used to investigate the hazard ratio of coffee intake for oral/esophageal cancer. Covariates included smoking, Body Mass Index, and alcohol consumption. The adjusted hazard ratio for squamous esophageal cancer in the four categories of coffee intake ranged from 0.96 to 1.16. No trend could be detected. The authors concluded that coffee intake has no inverse correlation with the incidence of oral/esophageal cancer. However, the possibility of a weak inverse relationship could not be excluded.

Tverdal A, Hjellvik V, Selmer R. *Br J Cancer* 2011;105:157–161. **References:** 16. **Reprints:** Dr V. Hjellvik, Department of Pharmacoepidemiology, Norwegian Institute of Public Health, PO Box 4404, Nydalen, Oslo NO-0403, Norway—*H.D. Khoo, Singapore*