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Nota di contenuto	Cover; Contents; Acronyms and abbreviations; Preface; Acknowledgements; 1 Introduction; 1.1 Background; 1.2 Sources of fluoride intake in humans; 1.3 Fluoride metabolism and excretion; 1.4 Biomarkers of fluoride exposure; 1.5 Urinary fluoride assessments in population oral health; 1.6 Areas of uncertainty; 2 General design of study; 2.1 Background; 2.2 Identification of participants; 2.3 Sampling; Location; Number of subjects; Age groups; Frequency; Time of study and number of days; 2.4 Methods of monitoring; 2.4.1 24-hour urine collection 2.4.2 Timed collections of urine obtained from defined periods of a day 3 Methods for collecting urine, and for handling and evaluating results; 3.1 Recording of information; 3.1.1 General information; Figures; Figure 3.1 Example of daytime label used in time-controlled collections, to be attached to the urine collecting jar (WHO Form No. 96392, modified); Figure 3.2 Overnight urine collection label used in time-controlled collections (WHO Form No. 96393); Figure 3.3 Summary record form of urine collection from a group of children in time-controlled collections (WHO Form No. 96391) 3.1.2 Personal information Figure 3.4 Sample invitation; Figure 3.5 Questionnaire on use of fluoride supplements and toothpaste; 3.2 Essential preparatory practices; 3.2.1 Pre-collection planning approaches; 4 Twenty-four hour urine collection; 4.1 Procedure; 4.2 Fluoride and creatinine concentrations; 4.3 Information to be recorded; 4.4 Determination of fluoride in urine; 4.5 General rules for tabulation and processing of data; 5 Design of the final report for 24-hour urine collection; 5.1 Introduction; 5.2 Materials and methods; 5.3 Results; Tables Table 5.1 Urinary fluoride excretion data from 24-hour urine

collections
5.4 Discussion and conclusion; 5.5 Summary; 5.6 Tables for the 24-hour collection method; Table 5.2 Criteria for cleaning data from children aged 2-6 years, from 24-hour collections; Table 5.3 Standards for urinary fluoride excretion (mg/24-hour cycle): lower and upper margins; Table 5.4 Calculated daily urinary fluoride excretion associated with low, optimal and high fluoride intake for ages 1-14 years

Table 5.5 Calculated daily urinary fluoride excretion associated with low, optimal and high fluoride intake for broader age groups
6 Collections of 8-18 hours (within the 24-hour cycle); 6.1 Collection of nocturnal urine and during periods of high excretion; 6.2 Optional calculations obtained from time-controlled urine collection - Use of a standardized format; 6.2.1 Coded recordings of personal data and individual fluoride exposure; 6.2.2 Standard table for surveys with 24-hour collections; 6.2.3 Standard table for surveys with two collections totalling 14-16 hours, using MS Excel
6.2.4 Standard table for surveys with three collections totalling 14-16 hours using MS Excel: complete series

Sommario/riassunto

This manual informs about practical procedures in assessment of renal fluoride excretion based on experience from existing national fluoridation programmes. The assessment tools will primarily be useful in assisting countries in achieving an effective fluoride exposure. It is a hope that the manual will stimulate oral health personnel and public health administrators to use a systematic approach for managing and analysing data obtained from different levels of fluoride exposure. Finally the manual encourages inter-country collaboration on surveillance systems for community programmes using fluoride for pr
