the peripheral pulp tissue and that activates nerve endings by mechanical effect. Therefore openness of dentinal tubules is crucial for activation of intradental nerves. In hypersensitive dentine the dentinal tubules are open and in addition there is sensitization of intradental nerves possibly due to inflammation. Therefore the condition of dentine surface and inflammatory reaction in the pulp tissue seem to be important factors in the development of hypersensitive dentine. These two factors should be taken into account when considering treatment for hypersensitive dentine.

**Risks of amalgam toxicity in dental treatment**  
Majambo M.H.

Dental amalgam has been one of the most serviceable restorative material used in dentistry for over 100 yrs. Its numerous clinical advantages eg. High mechanical strength, good working properties etc; may account for its popularity. Amalgam is indicated for restoration of posterior teeth due to its high mechanical strength and ability to overcome masticatory forces and its esthetic disadvantage. Dental amalgam has been shown to have toxicity due to its mercury content. The risk of toxicity may be mainly to the dental personnel during handling of amalgam [Jocchini, J.J. Dental amalgam, Restorative dent. 1967]. It has been indicated that the toxicity to the patient may be minimum [FDI annual world Dental congress 2001], however in some countries, amalgam is not in use mainly due to pollution reason. The aim of this article is to review the above named advantages and compare with the health risks that may be caused by dental amalgam.

**Odontogenic tumour and tumour-like lesions in Tanzania**  
Simon E.N.M., Stoelinga P.J.W., Vuhahula E. and Ngassapa D.

Objectives: To retrospectively document the pattern of occurrence of odontogenic tumours in Tanzania over fifteen years.  
Design: The histologic types, site, age and sex distribution of odontogenic tumours in Tanzania from 1982 to 1997 were reviewed. Records of patients who presented to the four referral centres in Tanzania and who had histologically proven oral tumours and tumour-like conditions were examined.  
Results: Odontogenic tumours comprised about 12.2% of all oral tumours and tumour-like conditions. The majority of odontogenic tumours (55.3%) were seen in patients below 30 years of age and they more commonly affected the mandible than maxilla. Ameloblastoma was the most commonly seen odontogenic tumour (73.7%), followed by odontogenic myxoma (10.3%). The site, sex, and histologic distribution of ameloblastoma did not differ from other African studies. Over 50% of patients with ameloblastoma presented to hospital late (after three years or more years).  
Conclusion: In order to improve on the treatment outcome, the need for early detection and referral of patients by medical personnel and dentist is stressed.