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Conscious sedation: Ambulatory techniques for modern, in-office dental patient management

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Standards for conscious sedation techniques for the dental office have been developed for decades mostly in the US and the UK, and numerous publications have proven their efficacy and safety. Other studies have advocated the need for such techniques for the management of phobic and anxious patient regarding dental treatment. Sedation offers wide spectra of possibilities from hypnosis to deep sedation involving multi-drug techniques by adequately trained professionals. Conscious sedation has been defined as: "A technique in which the use of a drug or drugs produces a state of depression of the central nervous system enabling treatment to be carried out, but during which verbal contact with the patient is maintained throughout the period of sedation. The drugs and techniques used to provide conscious sedation for dental treatment should carry a margin of safety wide enough to render loss of consciousness unlikely. It is of fundamental importance that the level of sedation must be such that the patient remains conscious, and is able both to understand and respond to verbal commands." Two main techniques comply with this definition: inhalation sedation using nitrous oxide and oxygen, and single-drug intravenous administration of a titrated benzodiazepine. Proper use by trained, equipped and experimented dental professionals offers safety, efficacy and a tremendous level of patient satisfaction.

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Orthodontics, occlusion and temporomandibular dysfunction

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Orthodontics and the rehabilitation dental are dental specialties that modify significantly the dental occlusion; these changes in oclusales can be unfavourable for some patients, as long as the static and dynamic standards of oclusal are not taken into account. There is currently a lot of controversy about the treatment of rehabilitation and orthodontics performed in Centric Relation (CR) and beyond, the confusion is evident, its existence is questioned, we will provide our clinic experience on this delicate subject. The presence or occurrence of temporomandibular mandibular dysfunction during orthodontic treatment and rehabilitation is a clinical concern, delaying the treatment, the patient is worried and it increases the stress values of both. We need to know the possible causes that trigger temporomandibular mandibular dysfunction and how to deal promptly and effectively? For which we have important casuistry and videos full HD with clinical management of these cases. We develop the topic with a practical-clinical approach showing different concepts and techniques to conventional focus, with the premise problem resolution.

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