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The effect of nasal midazolam premedication on parents-child separation and recovery time in dental procedures under general anaesthesia

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Aim: For many children's medical and dental procedures, unfamiliar dental staff and treatment places are disturbing and stressful. Stress in children often makes them uncooperative. General anaesthesia is indicated for anxious uncooperative children or those who are disabled, immature or too young to undergo dental treatment by other means. Moreover parents' separation while entering the operative room is a traumatic experience for children. Thus premedication such as midazolam is recommended to decrease child's stress. In these situations, the increased recovery time was considered as one of the midazolam side effects. There is no study that evaluated the effect of midazolam both in parents-child separation and recovery time in long dental procedure. The purpose of this study was to evaluate the effect of nasal midazolam premedication with placebo on parents-child separation and recovery times in uncooperative paediatric patients undergoing long-lasting general anaesthesia for dental procedures.

Study Design: This randomized, double-blind study was done on 60 uncooperative patients (ASA physical status I or II) aged 2-4 years who were scheduled for general anaesthesia for dental treatment. Group A received 0.2 mg/kg intranasal midazolam as premedication, and group B received the same volume of intranasal placebo 20 minutes before entering the operating room for general anaesthesia. General anaesthesia was done with the same method for all patients, then parent-child separation and recovery times were compared between the two groups.

Statistical Analysis: Statistical significance was set at $P \le 0.05$. Statically analysis was performed using SPSS version 17. Chi-squared and student t-tests were applied to analyse the data.

Results: We found significant differences in parents-child separation assessment between two groups. Nasal midazolam premedication had a positive effect on parents-child separation; but there was no significant difference between the two groups in terms of recovery time.

Conclusion: Premedication of nasal midazolam before induction of general anaesthesia did not prolong recovery time, but made the separation of children from their parents easier by showing a better behaviour.

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Intentional replantation: An updated protocol in endodontic retreatment

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Intentional replantation (IR) is a concept that has been known for over a thousand years, it is defined by Grossman (1966) as an atraumatic extraction of a tooth and its reinsertion into its socket immediately after endodontic treatment and apical repair is done extra-orally. Intentional replantation is a treatment option when more conventional forms of treatment and retreatment either fail or are impossible. Recent case reports have demonstrated that with good case selection, intentional replantation can be a reliable and predictable procedure. The two most important factors for successful intentional replantation procedures are short extraoral time and atraumatic extraction. Through case reports, the indications and contraindications for intentional replantation will be discussed. The updated procedures for this rarely used treatment will be presented.

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