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Considerations in the management and treatment of the prosthodontics patient who is using illicit drugs

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A wide array of individuals present to the dental office for the prosthetic replacement of missing teeth. Patients with substance use disorders are sure to be among these individuals. The prosthodontic rehabilitation of these patients often requires certain modifications for treatment. These patients often exhibit various oral/dental presentations which are not routinely encountered in other patients. Methamphetamines are one such drug. Users of methamphetamines have been known to have the buccal smooth surfaces of their teeth and the interproximal surfaces of the anterior teeth ravaged by decay. These individuals also may exhibit clenching of teeth, xerostomia and temporomandibular disorders. Caution also needs to be taken when administering local anesthesia or nitrous oxide. Heroin users often exhibit an increase in dental caries as a result of craving for sweets, poor oral hygiene and anxiety regarding dental treatment. Heroin users often also exhibit an increase in periodontal disease and oral fungal and viral infections. Cocaine users often exhibit gingival lesions, bruxism, cervical wear, an increased rate of periodontal disease and an increased rate of tooth decay. It is also important to note that corrosion of gold dental restorations is also seen in these patients. Epinephrine-impregnated retraction cords are also contraindicated. The use of cannabis can also precipitate various oral conditions which can complicate the prosthodontic treatment of the patient. These conditions include alveolar bone loss, gingival hyperplasia and xerostomia. Tachycardia is also associated with acute marijuana toxicity.

Biography

William J Maloney, DDS is a full-time faculty member at New York University College of Dentistry. He is the author of numerous publications and has been awarded the American College of Prosthodontists Achievement Award.

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