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Moderate and deep sedation experience in pediatric dental patients in Riyadh

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The prevalence of dental caries among Saudi children is greater than 80%. Changing in the lifestyle of the Saudi population in the 🗘 past decades is associated with high prevalence of dental caries such as an increase in the consumption of sugary food, carbonated drinks and lack of awareness towards proper oral health maintenance. Many of those children attended dental clinic if they have dental pain or dental abscess that makes treatment on dental chair is challenging for the dentist. Therefore, many of those young children receive dental treatment under sedation or general anesthesia (GA). Oral sedation in pediatric dental clinic was initiated more than ten years ago in Prince Sultan Medical Military City (PSMMC) in Riyadh. Oral sedation was provided as single drug and monitored by the pedodontist. All patients received sedation were healthy children (ASA1). Sedative drugs were either midazolam 0.3-0.5mg/ kg or Vallergan Forte (alimemazine tartrate) 1-2 mg/kg. Though for the safety of the patients, the hospital policy has changed and oral sedation (midazolam) was provided and monitored only by the anesthesiologist in the dental chair for four years. Patient safety was still a great concern for the hospital administration and it was decided to follow same protocol of sedation in the dental day case operating room as the area is fully equipped to deal with any emergencies and possibility to administer GA. In addition, the recovery area has advanced monitoring machines and qualified recovery nurses. Unfortunately, dental treatment provided was minimal as midazolam in its own was not effective enough and children were fully awake and uncooperative. Therefore, a new protocol has been approved by the department of anesthesia to administer multiple sedative drugs as a cocktail of IM or IV midazolam, ketamine and atropine (doses are adjusted according to the patient's body weight). IV line is applied for all patients treated under sedation for IV fluids and for immediate interaction in case of emergencies. All patients must have pretreatment assessment and full blood profile few days before the treatment. Patients are required to fast 6-8 hours before the operation. Patients who received multiple sedative drugs are usually in state of moderate to deep sedation and hence they require longer time for recovery similar to that for the GA. Pedodontists who treat patients under sedation, must have passed the test of the sedation course provided by the hospital. In our sedation protocol, showed successful dental treatment without any complications and reduce the need for GA. However, dental sedation is provided only inselective cases and not an alternative to dental treatment on dental chair with behavior management or treatment under GA.

Biography

Zubaida Al Karaawi has completed her Master's degree in 1999 in Pediatric Dentistry and PhD in Clinical Dentistry from UCL, London in 2004. She had completed six months course and passed the examination in Sedation and Pain Management from the Eastman Dental Institute in 2006. She is a Consultant in Pediatric Dentistry and teaching in the Saudi Board Program (Pediatric Dentistry) at Prince Sultan Medical Military City in Riyadh. She has published several papers in reputed journals.

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