

4<sup>th</sup> Asia Pacific Congress & Expo on

# Dental and Oral Health

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## D.D.D. (“Do and Don’t Do”): A dental dogma; drug interactions in dental practice

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Advanced dental treatments demand extensive use of local anesthetics, vasoconstrictors, analgesics, tranquilizers, antibiotics and anti-inflammators. The lecture material will relate to interactions between “dental medications” and the most common physician prescribed ones. Heart patients treated with cardiotonics, diuretics and vasodilators need special consideration. The amounts and types of local anesthetics and vasoconstrictors have to be administered accordingly. Patients with arrhythmia present a major challenge. Antithrombotic and anticoagulant drugs interact with antibiotic and anti-inflammatory drugs. Even anti-hyperlipidemics require avoidance of certain antibiotics use. Three factors with which the dentist has to cope appeared on the scene in modern times. One is the complex, prolonged and invasive treatment with multiple implants. The other is the growing aged population requiring these treatments. And the last is the continuous changing in medications prescribed by the physicians to these patients. Advanced dental treatments require the use of local anesthetics containing vasoconstrictors. Avoiding the use of vasoconstrictors could lead to failures in anesthesia. Their excessive use could endanger the patient health and even life. How do we use them safely? Antithrombotic and anticoagulant drugs lead to an increased bleeding tendency. Interruption of antiplatelet treatment previous to surgical interventions might have catastrophic results. What is the dental surgeon’s protocol for preventing these failures? Patients treated with cardiotonics might need sedation. The use of diazepam (valium) is dangerous. How do we safely sedate them? Will the medical treatment of these patients fail if we administer antibiotics?

### Learning objectives:

1. To design a scientifically based preoperative assessment.
2. To understand the mechanism of drug-drug interactions.
3. To minimize drug toxicity and side effects.
4. To use “dental drugs” intelligently in light of their interactions with the most widely prescribed medications.
5. To define the DDD (“Do and Don’t Do”) recommendations for medically complex patients.

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## Complex oral rehabilitation under general anesthesia- The challenge and the modern solutions

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Oral rehabilitation will be presented in a practical way involving the cooperation of a specialized team, including the prosthetics, periodontology, oral surgery, oral medicine and anesthesiology.

Treatment with the help of implant based rehabilitation implies major surgical interventions: Sinus lift, vertical and horizontal bone augmentation, planning with CTs and computers, close to perfection CAD/CAM laboratory techniques, esthetic creativity and the use of biocompatible high quality materials. Again, the majority of cases were treated with implants produced by the Alpha Bio Company. The performed treatment implying these issues will be described in detail. Complex medical situations present challenges relating to wound healing around implants, tendencies to bleed, prevention of infections, the use of antibiotics and analgesics, all to be discussed in practical terms. Patient profile, length and complexity of the surgical-prosthetic treatments require often times the help of general anesthesia specifically adapted to our needs. The presentation intends to amalgamate these very serious challenges in order to enable the practicing dentists to apply them in his/her every day practice.

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