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Pulpotomy against extraction of teeth for congenital heart disease

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dvances in the field of pediatric cardiology have seen a change in the way bacteremia and the risk of endocarditis in children with congenital heart disease (CHD) are viewed by pediatricians and cardiologists. However, there is little evidence of the impact that this has on the way dentists treated the primary dentition in these children. While the success rates for pulpotomies have been increasing the extraction of the pulpally involved primary tooth remains the treatment of choice among pediatric dentists. The progress in cardiac surgery has meant that CHD is viewed today as a treatable condition. Although the exact rate of CHD within the Kingdom of Saudi Arabia is not available, regional studies have placed that rate at between 5.4 per 1000 live births to as high as 10.7 per 1000 live births. The kingdom also has one of the highest rates of early childhood caries (ECC) in the world with a recent metaanalysis estimating that around 85% of children below 6 years of age are affected with ECC. A total of 40 patients classified as mild/moderate risk for endocarditis being treated under general anesthesia will randomly receive one of two interventions i.e., pulpotomy followed by stainless steel crown in all abscess free teeth with reversible pulpitis and extraction of all pulpally involved teeth. The rate of failure of pulp therapy will be calculated by the pediatric cardiology team will cover the echocardiographic examination of any vegetation detection in patients with a clinical suspicion of endocarditis in each group will be measured using the paired positive test. This clinical study aims to evaluate the presence of bacteremia in children with CHD undergoing pulp therapy under general anesthesia and compare them to children who have undergone extraction of pulpally involved primary teeth.

Recent Publications

Dental Management of COACH Syndrome, EC Dental Science 4.6 (2016): 932-934. 1.

Biography

Huda Salem Alrakaf has graduated from King Saud University (KSU), Riyadh, Saudi Arabia in 1986. She then obtained her Master of Science in Dentistry at KSU in 1996. In Madrid, Spain 2003, she earned her specialized certificate on high risk and special need children. Later in the year 2007, she took a course in psychopathology of children and intervention at Howard University, Washington D.C., USA. Her achievements in 2001 were remarkable for the first publications of both Intra-nasal Midazolam in conscious sedation of young pediatric dental patients and dental management for coach syndrome followed by the first publication of implant for Seckel Syndrome in the year of 2017.

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