

Clinical Impact of Covid-19 Pandemic in Orthodontic Management

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ABOUT THE STUDY

The COVID-19 pandemic will have a long-term impact on orthodontic treatment. While some necessary adjustments will improve the work of orthodontists when the pandemic is over, others will not be cost-effectively enough. These changes affect the four areas of orthodontic treatment. Microbiological control measures through increased use of personal protective equipment, stricter protocols in and out of clinical settings, and minimization of aerosol-generating procedures [1]. The measures of social distancing by redistributing space and reducing the number of patients and companions in clinics. Increase in tele orthodontics and use of devices and techniques that require fewer scheduled emergency appointments. Bioethical concerns that provide a more complete knowledge of patients' psychological needs, as well as those of their family and communities. Some of these key adjustments were made while we struggled with the effects of the pandemic, but they may be reversible [2].

As the COVID-19 pandemic spread across the globe, many countries disrupted normal dental care, leaving only patients in need of urgent care to receive treatment. During the time, Brazilian orthodontists were invited to participate in an anonymous online survey. Dentists and associated health care providers are at risk of transmission and transmission of SARS-CoV-2 infection, either through direct transmission (inhalation of droplets/aerosols or contact with saliva and mucous membranes) or through indirect transmission [3]. Since it has not yet occurred, the possibility of transmission from aerosol-generating techniques cannot be completely excluded, it is clear that asymptomatic or incubating patients are also carriers of SARS-CoV-2 and can potentially be infected or even more concerned. There are concerns about stringent infection control measures against the highly contagious SARS-CoV-2. There are many published guidelines and new protocols for individual countries to follow in order to restore dental services around the world [4].

An orthodontist can treat many of patients a day. This fact makes stringent infection control measures with the highly

contagious SARS-CoV-2 a problem area. The majority of patients undergoing orthodontic treatment are children. Studies have reported asymptomatic children infected with COVID-19. The incubation period for this disease is 14 to 24 days. The virus is highly contagious even during this incubation period. The discovery raises alarm bells of potential danger.

Treatment of asymptomatic patients and spread of infection within correctional clinics, in addition, aerosol generation, which is routinely performed in orthodontics, has also been confirmed as an infection route. Characteristics of dental practice such as close face-to-face communication, droplet and aerosol generation methods, and contaminated surfaces expose dental patients and dentists to high concentrations of pathogenic microorganisms and high risk of cross-infection. Additionally, standard precautions are not sufficient to protect the doctor and patient from her COVID-19 infection, which presents a major challenge to dental care at this time [5].

Today's orthodontists are excited to incorporate new discoveries and new technologies into their practice. Today, due to COVID-19 restrictions, many patients may wish to undergo orthodontic treatment without a private session while an orthodontist can monitor the progress of treatment. Telemonitoring technology is particularly applicable to any procedure where treatment progress can be tracked with virtual examinations that complement clinic visits. Assessment may involve initial leveling and alignment, correction with maxillary expanders or orthopedic appliances, oral hygiene monitoring, and verification of elastic wear coordination.

CONCLUSION

Due to the high risk of disease transmission in orthodontic practice in emergencies, it was important for orthodontists to explore new treatment approaches. The use of smartphones has contributed positively to re-establishing a useful relationship between orthodontists and patients, allowing orthodontists to track treatment progress and stimulate patient collaboration. During the COVID-19 pandemic, it is imperative that an orthodontist think globally and act locally to minimize the risk

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of SARS-CoV-2 transmission in her orthodontics. Selected treatments, including routine orthodontic treatment, should be suspended and resumed only when approved by federal or state, and local health authorities. Emergency corrective care can be delivered by following an emergency plan based on effective communication and triage.

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