



Changing Trends in Dental Practice during the Pandemic

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COVID-19 pandemic has crippled and incapacitated the entire world in the past 6 months. With its array of symptoms and degree of severity, most countries-imposed lockdown time and again to prevent the spread of infection.

The pandemic has hit dental services severely due to the high risk of virus spread through aerosols and close contact between the dentist and patients and the risk of cross-infection between patients. Worldwide, dental offices were advised to restrict dental practice to emergencies or completely halt dental practice. Although most of the dental offices have partially or completely opened worldwide, lockdown persists in many countries.

Dental professionals have always been exposed to viruses in the past, such as HIV and SARS. Indeed, there is so much about COVID-19 that is undiscovered, but we cannot live with this fear for eternity; we must find a way to live with this pandemic.

Through this paper, I would like to highlight that there has been a paradigm shift in dental practice, from elective dentistry to emergency or need-based dentistry. Elective and cosmetic procedures have taken a back seat and pain management procedures are the forerunners.

The various dental emergencies that are usually encompassed:

- Traumatic injuries resulting in chipping or tooth fracture, subluxation of tooth or Dento-alveolar fracture or jaw fracture
- Irreversible pulpitis
- Tooth fracture
- Acute Abscesses like Dentoalveolar abscess, Acute Periodontal abscess, and Periapical abscess

- Pericoronitis and Pericoronal abscess
- Oro-Facial swelling resulting from a space infection
- Cellulitis
- Dislodged/fractured restoration

The treatment procedures necessary to treat these dental emergencies include:

- Closed/open reduction of jaw fractures
- Restoration of fractured teeth based on the degree of tooth fracture
- Tooth re-implantation into the socket immediately following the correct storage protocols and splinting into position
- Treatment of irreversible pulpitis and dentoalveolar abscess, peri apical abscess by endodontic therapy or tooth extraction
- Incision and drainage with antibiotic therapy for periodontal/pericoronal abscess as well as space infections
- Re-restoration of dislodged/fractured restorations
- Extraction/surgical extraction of partially/completely impacted wisdom teeth.

As teleconsultations and online consultations have been encouraged during the lockdown, the use of antibiotics and NSAIDs has become a mainstay to manage odontogenic infections and pain until a dentist is able to render definitive treatment.

Since the time this pandemic has hit the world, many modifications have been made for patient management in dental offices. Some of them are:

- Recording pO₂ using a pulse oximeter as well as temperature when the patient enters the clinic
- Recording medical and travel history as well as an informed consent from the patient for performing emergency dental treatment during the lockdown
- Treating patients on appointment basis and adhering to appointment timings strictly
- Eliminating waiting of patients
- Avoiding children and senior citizens unless they are themselves being treated
- Not more than one person should accompany the patient
- Disinfection of the dental operatory and frequently touched surfaces in the common/waiting area between appointments
- Strictly adhering to all the guidelines of personal protective equipment and sterilisation protocols as published by the regulating dental council
- Dentist must frequently update knowledge on the pandemic related guidelines and train the staff time to time.

While the search for a vaccine remains the primary focus to combat the pandemic, dental practices need to provide their services safely by modifying their practice, adhering to the regulations laid down by the governing dental councils.

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