

Orthodontics

Brackets caution

Sir, we write in response to the letter on orthodontic brackets for dental trauma.¹ While this may seem a viable alternative during the pandemic, it would not be advisable to have brackets and wires placed by general practitioners without the supervision of an orthodontist. There are a multitude of considerations to be made before these can be included as a part of emergency care. Previous studies have shown that orthodontic splinting following trauma leads to an increase in pulp canal obliteration when compared to conventional splinting,^{2,3} and with intruded teeth the pulp survival prognosis becomes worse.⁴

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References

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Antibiotic resistance

Prescription audit

Sir, we write in response to the recent editorial on antimicrobials.¹ We work within the Community Dental Service (CDS) in Merseyside and thought it would be pertinent to audit the antibiotic prescribing patterns over the first wave of the COVID-19 pandemic. We found that within our trust these declined during the first wave of the pandemic. Out of 81 prescriptions, 49% did not have a diagnosis and only 33.3% were justified within FGDP antimicrobial guidelines. The most common reason for prescribing was pain (27.2%) and diffuse swelling (22.3%). Other reasons included delayed treatment, patient expectation and

uncertainty of diagnosis. Out of the 81 patients that received prescriptions, 44.4% did not have a clinical intervention. This would be due to the restrictions of dental treatment at the time. Working within the CDS means we have additional challenges of special care patients with communication difficulties and complex needs. This has been exacerbated over the pandemic.

The results of the audit were disheartening, but highlighted problems and discrepancies and allowed us to disseminate the appropriate information to clinicians. It may be likely that this pattern of increased antibiotic prescribing seems an obvious outcome of the pandemic, however, as dentists we have a critical role in reducing antibiotic resistance. This time would be a great opportunity to audit these prescribing patterns and protect the use of antibiotics for the future.

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Reference

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