

# **Is osteonecrosis (ONJ) of the jaw a problem for our patients in Wales?**

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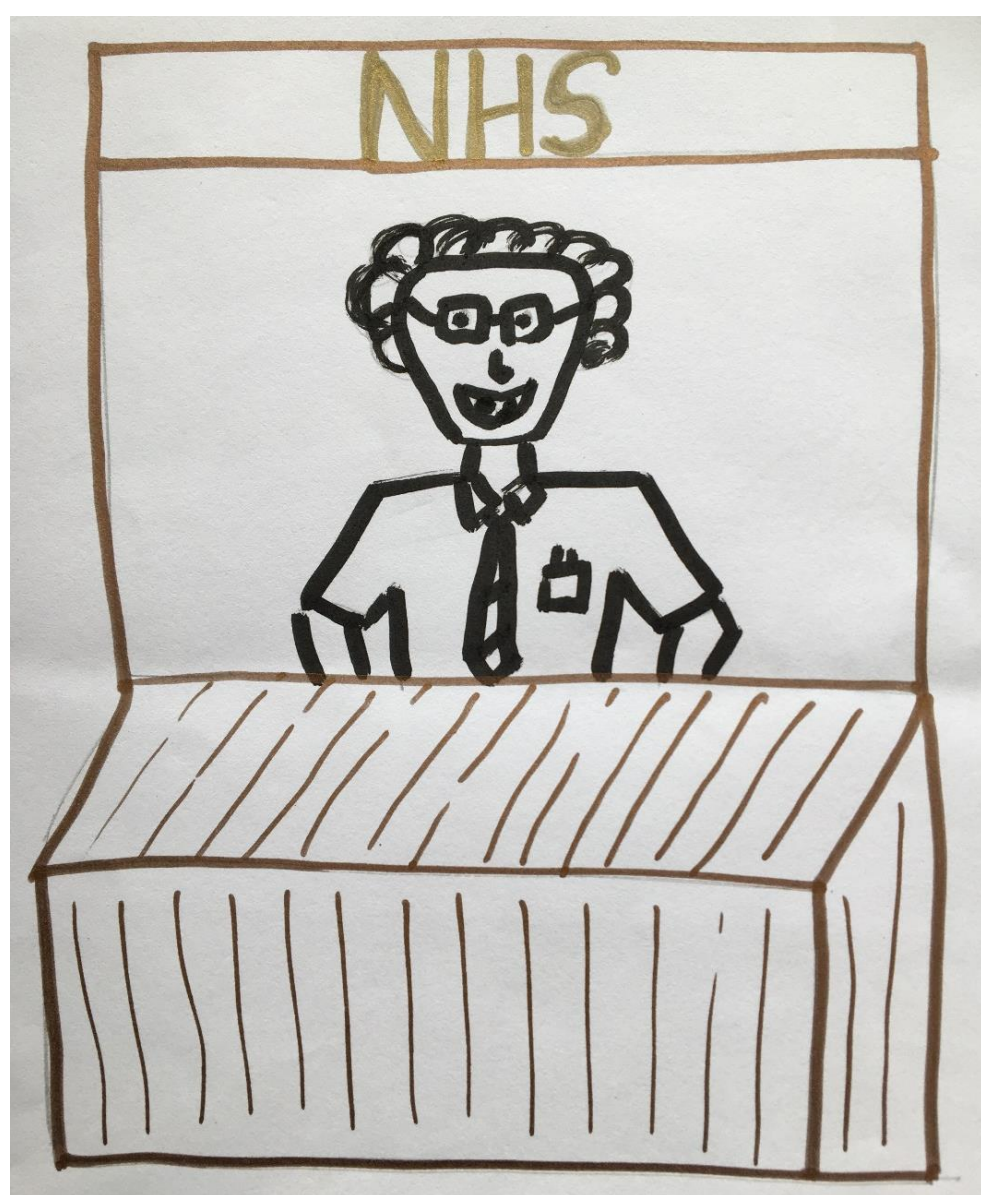
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Ed



- Rheumatoid arthritis
- Ankylosing spondylitis
- Prednisolone ++ in past
- Osteoporosis
- Alendronic acid
- Humera
- Analgesics prn
- Antibiotics for dental infection prn



# Ed's problem



Refer to specialist

“Complex medical history, complex dental treatment”

What is not said

“alendronic acid= osteonecrosis= hassle”

# Ed's problem



- “Sort your teeth out”
- “Stop Humera if you want”
- “dental extraction + alendronic acid = osteonecrosis”

# WHAT IS ONJ ?

## Stage 1 MRONJ



*STAGE 1 - is characterized by exposed bone, that shows no indication of disease or inflammation of the soft tissue around the bone.*



# Stage 2 MRONJ



STAGE 2 - is distinguished by painful areas of exposed bone accompanied by soft tissue or bone inflammation or infection.

# Stage 3 MRONJ



*STAGE 3 - is the most advanced stage of BRONJ. One of the most significant features is a fracture of bone that has been weakened by the disease. In addition, there is an extensive amount of exposed bone, soft-tissue inflammation and infection.*



# ONJ in Wales?

## RESEARCH

### MRONJ risk reduction pathway - 360 degree survey

A. Muthukrishnan,<sup>\*1</sup> S. Al-Ismail,<sup>2</sup> G. Bertelli<sup>3</sup> and P. Browne<sup>4</sup>

#### In brief

Preventive dental screening reduces the incidence of MRONJ/BRONJ.

A cross-service cross-healthcare boundary preventive pathway was developed.

Alternative ways of delivering specialist led MRONJ/BRONJ preventive services can be successful with a robust clinical governance framework.

- BISPHOSPHONATES/ DENOSUMAB
- 92% screened in primary care
- 100% of oncologists satisfied with pathway
- 83% of patients satisfied with treatment
- 88% of dentists in primary care satisfied with pathway

# National guidance



Scottish Dental  
Clinical Effectiveness Programme

## **Oral Health Management of Patients at Risk of Medication-related Osteonecrosis of the Jaw**

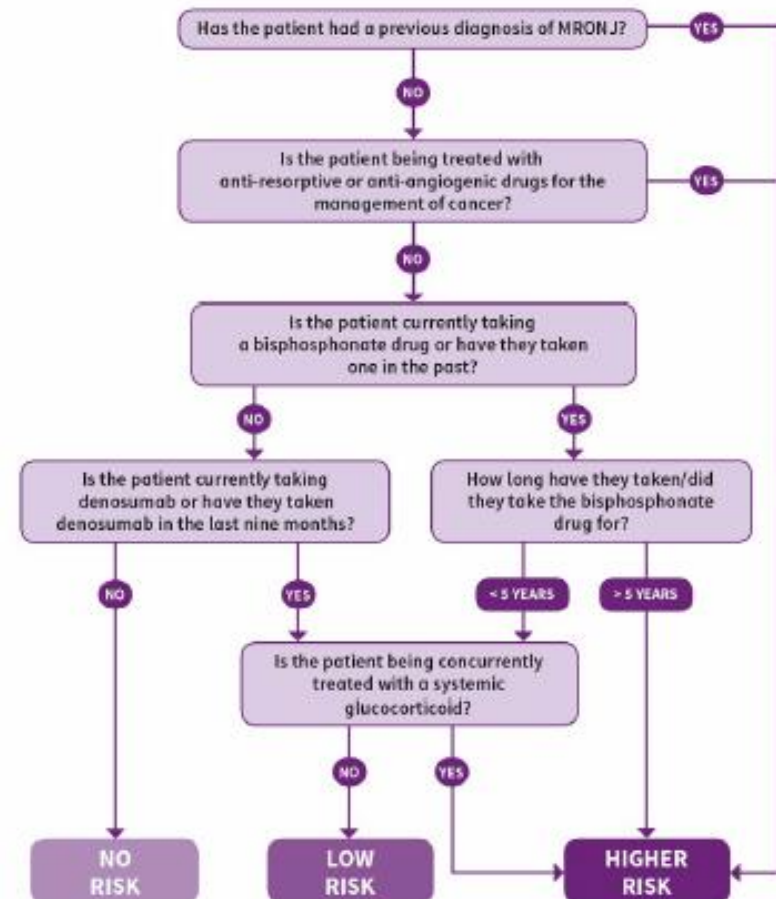
**Guidance in Brief**

**March 2017**

For further details, please refer to the full guidance, available at  
[www.sdcep.org.uk](http://www.sdcep.org.uk)

# Who is at risk

## Oral Health Management of Patients at Risk of Medication-related Osteonecrosis of the Jaw - Assessment of Patient Risk



N.B. Be aware that any low risk patient who continues to take bisphosphonate drugs after their five-year medication review should be reclassified as higher risk.

For further details of the guidance recommendations and advice on following them, refer to the full guidance, available at [www.sdcep.org.uk](http://www.sdcep.org.uk)

# Explaining risk to patients



Scottish Dental  
Clinical Effectiveness Programme

Dental advice for patients prescribed anti-resorptive drugs for the treatment of osteoporosis or other non-malignant diseases of bone

## Risk level

For patients taking anti-resorptive drugs for the treatment of osteoporosis or other non-malignant diseases of bone, the risk of developing this side effect is between 1 in 1000 and 1 in 10,000. The illustration below may help you visualise what this means for you.

<b>Risk:</b>	1 in 10	1 in 100	1 in 1000	1 in 10,000	1 in 100,000
<b>Frequency:</b>	Someone in your family	Someone in a street	Someone in a village	Someone in a small town	Someone in a large town
<b>Illustration:</b>					

# Pillars of prevention

- Stop smoking
- Reduce alcohol consumption
- Reduce frequency and amount of sugary snacks and drinks
- Brush twice a day with fluoride toothpaste

# Ed's problem

## Can I decrease my risk of developing this side effect?

There are several things you can do to reduce the risk of this side effect:

- **Visit your dentist for regular dental check-ups**

Your dentist will monitor your oral health to ensure that any dental disease that may develop is treated before dental surgery is required.

- **Ensure that you tell your dentist about all the medications you are taking and your medical history**

Tell your dentist about any health problems that you have and all medicines that you are taking so that the dentist can assess your individual risk for developing MRONJ.

- **Talk to your dentist about oral hygiene**

Cleaning your teeth regularly and carefully is the best way to prevent oral diseases that may require dental surgery. Your dentist can help you ensure the cleaning technique you use is effective.



# Definition of Special Care Dentistry

concerned with the improvement of the oral health of individuals and groups in society who have a physical, sensory, intellectual, mental, medical, emotional or social impairment or disability or, more often, a combination of these factors

(adults)

*General Dental Council, UK*

# Stimulate debate

Do you know how dental services are organised and delivered in Wales?

- GDS
- CDS
- HDS

- Do you know how patients are charged for services in Wales?
- GDS- NHS/ private insurance/ Pay as you go private
- CDS- free (England- pay salaried services)
- HDS- free (high complexity groups only)

# Ed's solution

- Early and continuing prevention
- Include oral health in general health
- DIALOGUE
  - Policy makers
  - Dental leads

