

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction
Division Of Prisons

SECTION: Clinical Practice Guidelines

POLICY # CP- 24

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SUBJECT: Dental Care and Patients on Bisphosphonate
Therapy

EFFECTIVE DATE: September 2008

SUPERCEDES DATE: None

PURPOSE

To assure DOP inmates taking or previously taking bisphosphonate (BP) medications receive high quality dental care.

POLICY

Osteonecrotic jaw (ONJ) is a medical complication that has occurred after oral surgery, including simple extractions, in some patients with a history of taking oral or intravenous BP medications. DOP dentists shall follow this policy when they perform oral surgery in patients with a history of taking BP medications.

BACKGROUND

BPs are widely prescribed medications to treat osteoporosis and Paget's disease. They are also prescribed to treat hypercalcemia, multiple myeloma and metastatic bone lesions. When used in oncology, doses are higher and typically given intravenously.

Some frequently prescribed oral BPs include Fosamax, Boniva, Actonel and Didronel. Intravenous BPs include Zometa, Reclast, and Aredia.

ONJ has been linked to the use of these medications. ONJ is defined as exposed necrotic bone at the surgical site that persists for at least six weeks.

The cause of BP-associated ONJ has not been determined. It is possible that other risk factors have not been identified. Many patients undergoing intravenous BP therapy are concomitantly taking other medications (e.g., corticosteroids) which may play a role.

The best current evidence is that the greatest risk of ONJ exists in patients who received high dose intravenous BPs. Patients taking oral BPs appear to have little or no higher risk for ONJ. Some studies have shown that oral BPs may actually have a protective association.

At this time there is no consensus on the value of suspending oral BP therapy prior to performing oral surgery.

PROCEDURES

1. The FDA recommends a dental examination prior to initiating intravenous BP therapy and advises that cancer patients avoid invasive dental procedures while undergoing intravenous BP therapy.
2. Patients on oral BPs should be informed of the association between BP and ONJ and the small risk of delayed healing.
3. Dentists should consult with the patient's Primary Care Physician and the UNC Hospital Dental Clinic before performing oral surgery on patients with a history of receiving intravenous BPs.

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4. Because intravenous BP therapy may be used in oncology, the facility dentist should be notified if a patient is diagnosed with a condition where BPs may be prescribed. The dentist should contact the oncologist to determine if a dental examination and pre-therapy dental treatment is recommended. If recommended, a baseline oral evaluation should be obtained consisting of a complete oral examination (including periodontal evaluation) with a full series of intraoral radiographs and panoramic film in the dentate patient or complete examination and panoramic film in the edentulous patient.
5. Routine procedures should be performed in DOP dental clinics unless there is a compelling reason to refer to a hospital-based clinic.
6. The treatment plan for patients scheduled for intravenous BP therapy should include (1) extraction of hopeless or questionable teeth due to caries or periodontal disease, (2) restorative procedures, (3) endodontic procedures, (4) prophylaxis and oral health instruction, and (5) other services recommended by the oncologist consistent with DOP policy. Extractions should be completed early in the treatment plan. The objective is to avoid the need for invasive dental procedures during and following BP therapy.
7. In cases of ONJ, debriding the wound and trimming bony margins does not facilitate healing and likely will create a larger wound. Consequently, dentists that encounter delayed healing in patients with a history of taking BPs should have their patient evaluated by an oral surgeon before performing additional procedures.



9/11/08

Paula Y. Smith, MD, Director of Health Services

Date

SOR: Dental Director