

COVID: OVERCOME RESISTANCE WITH AWARENESS

This restricted access to face-to-face dental appointments resulted in a significant increase in antibiotic prescribing during 2020, which is a problem because it drives the development and spread of infections that are resistant to antibiotics. Using antibiotics to make up for a lack of access to urgent dental care is, therefore, a risk to patient safety and should be avoided wherever possible. Ensuring timely access to appropriate and effective treatment is the best way to provide care for patients with acute dental pain or infection. The whole healthcare system needs to facilitate guideline-congruent urgent dental care - from the most senior managers to the most junior front-line dental team members.

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Keeping people with dental pain and infection safe must sit at the heart of any oral healthcare system. As the cornerstone of modern medicine (such as cancer treatments and organ transplants) and the last line of defence for some life-threatening infections, it is essential for the safety of our patients, friends and ourselves that we use antibiotics judiciously. In this respect, dental teams have an important role for patients' overall health and wellbeing beyond just their oral health.

Antibiotic-resistant infections are not only a problem for those taking the antibiotics - their spread is a problem for society as a whole. Within the next 30 years, more people will die from resistant infections than from cancer, unless we start acting now. The WHO predicts that antimicrobial resistance (AMR) will be the world's biggest killer by 2050.

Preventing infections through routine patient care is always better than curing them, as it avoids antibiotics altogether. Managing patients during COVID-19 was a significant challenge for dentistry - let's now strive to optimise antibiotic prescribing using the latest guidelines. Do you know when phenoxymethylpenicillin is indicated over amoxicillin? Spreading awareness that antibiotics don't cure toothache is an important part of stopping resistance, including by increasing team knowledge and reducing patient expectations for antibiotics.

So what next? We know the impact that preventing oral disease can have. Perhaps the next major conversation should be a frank discussion with the public about what to expect from dentistry into the future.

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