

## Urgent dental care for patients during the COVID-19 pandemic

During the initial phase of a pandemic, when a vaccine is not available, personal protective equipment (PPE)<sup>1</sup> plays a major part in disease control. Dental and oral surgery procedures using drills or ultrasonic devices cause aerosol release, and routine dentistry has therefore been suspended in several countries, including the UK, to reduce virus transmission. There is an urgent need for organised emergency dental care delivered by teams provided with appropriate PPE.<sup>2</sup> This also allows for redistribution of PPE to urgent care when there is inevitably an initial shortage and distribution challenge.

Timely and major reorganisation of dental care services is challenging. Early management of acute dental emergencies is important to avert patients from Accident and Emergency services and to avoid hospital admissions. One concern is that with the suspension of routine dental care, more patients than usual could need admission for the management of acute dental infections that threaten the airway and require intensive care.

Patients with substantial swellings can progress to life-threatening emergencies, which can increase risks in the setting of reduced health-care availability. For such patients, extractions of the causative pathogenic teeth should be prioritised over restorative rescue, and input from dedicated oral surgery and oral and maxillofacial services and close follow-up should be instigated as locally appropriate. This approach has many benefits, including stewardship of antimicrobials, but is a deviation away from routine dentistry that should be thoroughly discussed with patients. Decisions on undertaking treatment should therefore be made with appropriate patient consent. Clinicians might wish to follow up patients

digitally (eg, through video calls), if appropriate, to ensure patient safety, but also to minimise repeated patient contact.

Testing for coronavirus disease 2019 (COVID-19) in dental professionals should be undertaken with the same high priority as that of medical health-care workers in hospitals. The risk of a dental practitioner being positive for COVID-19 and potentially infecting patients attending emergency dental services should not be underestimated. Proactive and preventive measures need to be established as mainstay protocol to contain the spread of the virus.

We declare no competing interests.

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Published Online  
April 3, 2020  
[https://doi.org/10.1016/S0140-6736\(20\)30806-0](https://doi.org/10.1016/S0140-6736(20)30806-0)

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