

Oral Surgery with minimal factor support

A study involving 134 consecutive patients

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Objectives:

To assess if local measures and careful surgical technique can give acceptable haemostasis following oral surgery in the acquired bleeding disorder patient population.

To review possible contributing factors of poor oral hygiene, smoking and Cox-2 analgesia have on post operative bleeding.

To determine if IDN blocks are safe to administer without factor cover.

Methods:

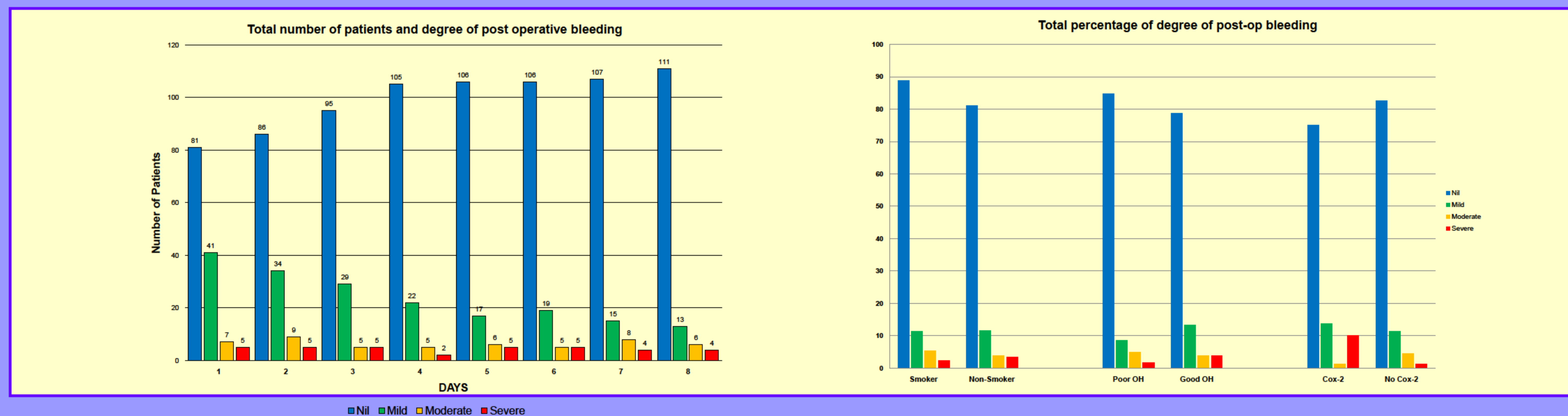
134 consecutive inherited bleeding disorder patients had from one to eight extractions under LA or GA at the Alfred Hospital Dental Unit.

If the patient was on prophylactic factor cover they remained on this, if they were not on prophylactic cover they received no factor cover for their oral surgery irrespective of their factor level.

All extractions were performed with careful surgical technique, all sockets flooded with 5% tranexamic acid, surgicel placed and carefully closed with either 3-0 vicryl or 4-0 monocryl sutures.

All patients were given an eight day post operative bleeding assessment to fill out and return at their post operative review.

Details on smoking habits, assessment of oral hygiene and type of post operative analgesia was noted.



Results:

134 consecutive patients had a total of 285 extraction, 71 surgical and 214 simple. A total of 96 inferior dental nerve blocks were administered with no significant post injection swelling, bruising or evidence of injection site haematoma.

Of the 134 patients 15 returned for bleeding management, with a total of 30 days of bleeding (2.8% of total study time) 4 patients had severe haemophilia, 4 moderate and 7 mild. 5 cases were surgical wisdom teeth, 10 cases were simple extractions (from 1 to 8 teeth).

There was no significant difference in post-operative bleeding associated with poor oral hygiene, smoking or the use of post-operative COX-2 inhibitors.

Conclusions:

Oral surgery can safely carried out within the inherited bleeding population without additional factor support.

Inferior dental nerve blocks can be administrated safely without additional factor cover.

There is no apparent increased post operative bleeding risk with smoking verses non-smoking, good oral hygiene verses poor oral hygiene and the use of peri-operative and post operative Cox-2 inhibitor analgesia.

