

Dental treatments in the time of COVID-19

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#TOGETHERSTRONG

COVID-19: Important information for patients

COVID-19 has far-reaching consequences for our social lives. Dentistry is also very severely affected. Many patients are currently not sure whether to attend their appointments and undergo upcoming dental procedures. That's why comprehensive explanation is particularly important.

As a world-leading supplier of dental implants, we give top priority to the health and safety of customers and patients. This document is designed to help dentists explain the current situation. We attach the utmost importance to giving you reliable information from trustworthy sources.

So that you can better assess the general situation for your treatment with your own dentist, specialist or surgeon, we have compiled the following information for you with the kind support of leading experts in implantology, **Professor Knut Professor Knut A. Grötz MD, DDS, PhD (GER) and Priv.-Doz. Eik Schiegnitz MD, DDS, PhD (GER)**.

Please stay healthy!

A handwritten signature in white ink, appearing to read 'H. Haderer', is positioned above the name and title of the signatory.

Holger Haderer
EVP, Head of Marketing & Education
Straumann Group

Dear patient,

The following information is designed to enable you to assess, more effectively and reliably, the general situation regarding imminent treatments with your dentist, specialist or surgeon in the time of the corona pandemic. This is important because the wealth of complicated, occasionally confusing, and even apparently contradictory information has caused, and still causes, uncertainty and anxiety.

At a very early stage, the virologist Professor Christian Drosten MD, Charité Berlin (GER), highlighted the three key points in dealing with this pandemic:

- a. Around 70 % of the population (i.e. well over 55 million virus carriers in German!) would need to be infected before herd immunity occurs.
- b. The rate of spread of this infection must be slowed down because otherwise our hospitals will be hopelessly overloaded with the rapidly growing number of severe progressions.
- c. The most effective way of achieving this is to avoid the droplet infections that occur during human interactions.

In light of these facts, it is understandable that hospitals throughout Germany and in other countries have significantly increased, and in some cases even multiplied, their intensive care capacities. To this end, anesthesia teams have been withdrawn from the central operating rooms in large numbers and been assigned to intensive care units. When shutting down the central ORs, the primary aim was not to avoid infections but to create intensive care capacities. On the other hand, the disadvantages as a result of refraining from, or postponing, hospital procedures very quickly became clear in hospitals, since treatment delays are often associated with health risks for the patients concerned.

Since some have even talked about closing down all dental practices completely in the pandemic situation, the following questions arise for you as the affected patient:

1. Is it advisable to create capacities for seriously ill patients by refraining from dental treatments?

Certainly not, since the staff and equipment available in a dental practice cannot be used for treating COVID-19 patients.

2. What is your risk, as a patient, of contracting the virus during a visit to the dentist?

The risk is very manageable and certainly much less than in the rest of public life, since the following rules have already been observed for a long time and new ones added:

- The basic hygiene regimen that has been established in the treatment room for many years serves as a highly effective infection barrier! For many years there have been no reports of infections with other known serious viral illnesses (hepatitis C, HIV, Ebola etc.) – either in patients or among treatment teams!
- This basic hygiene during visits to the dentist has now been extended to other areas: From dispensing with a welcoming handshake to wearing a face mask during consultations.
- Besides, general distancing rules on entering the dental practice and in the reception and waiting area are highly recommended and are generally implemented.
- Virus-positive patients and actual suspected cases are identified over the phone before the patients visit the practice and referred to specialist facilities that are equipped to deal with them. They are not treated together with healthy patients!





3. Can drawbacks arise for you as a result of refraining from or delaying treatment?

Yes, in fact considerable harm to your health can even result from an ill-advised delay in treatment. The range of indications cannot simply be divided into "emergencies" and "things that can wait".

- It is universally agreed that emergencies (acute inflammation, accidents, injuries, etc.) need to be treated promptly, and centers for dealing with suspected corona cases are available for this purpose.
- Aside from the easily identifiable emergencies, there is a spectrum ranging from "urgent", via "unpostponable" to "postponable" treatments.
- "Urgent" indications exist if you, as the patient, experience chronic infections, which can then lead to a deteriorating situation locally (spread of the infection, damage to adjacent teeth, involvement of the maxillary sinus, etc.). If you have systemic underlying illnesses (diabetes, heart disease, etc.), serious harm can even result if the bacteria enter the circulation.
- "Unpostponable" indications exist if e.g. multi-stage and time-consuming procedures for restoring chewing function are in progress, and the success of the whole treatment is linked to the timely completion of the respective measure. In such cases, simply waiting or delaying treatment can result in damage to the rest of the teeth and disadvantages in healed jaw sections.
- While "postponable" indications also exist of course, these assume that you are not currently experiencing symptoms and that your dentist has performed a detailed analysis.

Your dentist is specialized in weighing up the advantages and disadvantages in these turbulent times. The ever present pandemic issue naturally leads to fears, but these understandable fears should not prompt us to make the wrong decisions. With all the restrictions on public life (contact ban, etc.), it is important for very close intervals of time to be stipulated. But for all dental and medical outpatient treatments, the pandemic issue will certainly be with us for many months before spontaneous (herd) immunity occurs or the public are vaccinated. Refraining from all medically necessary dental treatments cannot be recommended at this time.

4. What can you do yourself to avoid infection?

Managing the general infection risks has been the topic of an unprecedented public information campaign and thus become common knowledge almost everywhere. Please continue to follow these recommendations to the letter – including during visits to your dental practice:

- Wear a face mask when using public transport to travel to and from the practice.
- Phone your dental office sufficiently in advance to let them know of any existing symptoms of illness. The subsequent course of action can then be decided jointly.
- Always cough and sneeze into a disposable tissue or your elbow. And remember: Not every cough or sneeze is grounds for suspecting that you have the virus; it could also be the result of allergies or swallowing.

Separate information leaflets summarizing the most important aspects for ideal treatment in these pandemic times have been produced for your dentist and the whole practice team. Talk about this subject calmly with your trusted dental team and seek their advice in all matters relating to your oral health.

Stay healthy!



Professor Knut A. Grötz MD, DDS, PhD (GER)

Oral and maxillofacial outpatient clinic Burgstraße & Director of the OMF surgical dept. of HELIOS HSK Wiesbaden

From 1981	Studied human medicine and dentistry, as well as philosophy (basic course) at the Johannes Gutenberg University, Mainz.
1986	Doctorate in dentistry and, in 1992, doctorate in medicine
1991	Dentist specialized in oral surgery
1995	Specialist in oral and maxillofacial surgery
	Additional titles and certified specialist activities (SAs):
	<ul style="list-style-type: none">• Homeopathy (1997)• Plastic surgeries (1999)• SA Implantology (2001)• Ultrasound seminar leader, head-neck section, DEGUM Stage III (2001)• Speaker at the consensus conference in implantology of the associations BDZI, DGMKG, BDO, DGI, DGZI (2002)• SA Functional diagnosis/treatment (2004)• Specialist subject "Digital volume tomography" (2007)
1999	Habilitation, Venia legendi and lecturer at the University of Mainz; extracurricular professor
2000 - 2005	Research associate and senior physician at the Univ. Hospital for OMF Surgery, Mainz (Prof. Wagner)
2000	Miller Prize of the DGZMK
2001	Siebert Prize of the Childhood Cancer Research Foundation
1999 - 2013	Editor of the International Poster Journal for Dentistry and Oral Medicine (IPJ)
from 2002	Scientific advisory board of the journal <i>Deutsche Zahnärztliche Zeitschrift (DZZ)</i>
2004 - 2016	Secretary of the Hessen branch of DGI e.V.
from 2012	Fellow of the International Team for Implantology (ITI)
2015 - 2018	Vice-President of the German Association of Oral Implantology (DGI e.V.)
from 2018	President of the German Association of Oral Implantology (DGI e.V.)



Priv.-Doz. Eik Schiegnitz MD, DDS, PhD (GER)

2003 - 2009	Studied human medicine at the Justus-Liebig University Giessen and the University of Lausanne, Switzerland
2005 - 2008	Studied health economics at the SRH Mobile University Riedlingen, Qualifications: Graduate in health economics (FH/HB)
2010 - 2013	Studied dentistry at the Johannes Gutenberg University, Mainz.
since 2012	Research associate at the Clinic for Oral and Maxillofacial Surgery Mainz
2013 - 2015	Lead author on the updating of the S3 Guideline "Implant provision for oral rehabilitation in connection with head-neck radiotherapy"
2015 – 2019	Speaker at the Youth Forum of the German Association for Oral and Maxillofacial Surgery (DGMKG) and board member of the Science Working Group of the DGMKG
since 2015	Lead author on the updating of the S3 Guideline "Antiresorptive-associated necrosis of the jaw"
since 2018	Guideline representative of the German Association of Oral Implantology (DGI e.V.)
since 2017	Lead author of the consensus conference of the International Team for Implantology (ITI) on the use of reduced-diameter (narrow) dental implants
since 11/2018	Specialist activity: Implantology at the consensus conference on implantology
since 02/2019	Elected member of the International Team for Implantology (ITI Fellow)
06/2019	Science Prize (formerly Martin-Waßmund Prize) of the German Association for Oral and Maxillofacial Surgery (DGMKG)
since 09/2019	Board member of the DGI (German Association of Oral Implantology) Rhineland-Palatinate branch
11/2019	Habilitation and Venia legendi in Oral and Maxillofacial Surgery



You can find further information online at:
<https://www.straumann.com/group/en/patients.html>

Please note that governmental directives prevail over these recommendations. Please also note that these recommendations may evolve over time. Make sure to always use the most recent version and to keep yourself updated on any news, updates etc. These recommendations are based on the guidance given by governmental agencies aiming at protecting you, your employees and your patients. However, these recommendations do not give any guarantee that infection or transmission of the Coronavirus is in each and every case avoided. No entity of the Straumann Group shall be liable for any damages, costs, expenses etc. related to or arising from any guidance or recommendation given in this document.

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