

## Points to cover during antibiotic prophylaxis discussion with patient

### It is important that patients are not discouraged from undergoing dental treatment.

- ♥ Advise the patient that due to their heart condition/previous episode of infective endocarditis, there is a very small risk of developing infective endocarditis following an invasive dental procedure but ensure that they understand that the risk is very low.
  - Explain that infective endocarditis is an infection of the lining of the heart, often involving the heart valves, caused mainly by bacteria which enter the blood from outside the body.
  - Emphasise that infective endocarditis is a very rare but serious condition. The risk of infective endocarditis in the general population is less than 1 case per 10,000 people per year. However, their cardiac condition puts them at increased risk of developing infective endocarditis.

The figure below may help you to explain risk to patients.

Risk	1 in 10	1 in 100	1 in 1000	1 in 10,000	1 in 100,000
Frequency	Someone in your family	Someone in a street	Someone in a village	Someone in a small town	Someone in a large town
Illustration					

Adapted from Risk Language and Dialects, Calman and Royston, BMJ 1997; 315:939

- ♥ Explain that having an invasive dental procedure, such as an extraction, may increase the chances of bacteria entering the bloodstream.
- ♥ Explain that everyday activities, such as toothbrushing, flossing and chewing can also cause transient bacteraemias and stress the importance of good oral hygiene, which can reduce the risk from oral bacteria.
- ♥ Give advice on prevention of infective endocarditis to all increased risk patients including:
  - the potential benefits and risks of antibiotic prophylaxis, and an explanation of why antibiotic prophylaxis is no longer routinely recommended;
    - Explain that dental procedures are no longer thought to be the main cause of infective endocarditis.
    - Explain that it is unclear whether antibiotic prophylaxis prevents infective endocarditis and therefore it may occur whether or not prophylaxis is given.
    - Explain that antibiotics can cause side effects, such as nausea, diarrhoea and allergic reactions and, in rare cases, anaphylaxis and antibiotic-related colitis. It may also be helpful to discuss the issues surrounding antibiotic resistance.
  - the importance of maintaining good oral health;
    - Explain the importance of maintaining good oral health to prevent infective endocarditis.
    - Highlight the importance of regular dental check-ups to ensure that any dental disease is treated before invasive dental surgery is required.

## Points to cover during antibiotic prophylaxis discussion with patient

- Emphasise that excellent oral hygiene is the best way to prevent oral diseases that could require invasive dental treatment and will also reduce the chance of oral bacteria getting into the blood stream.
- Advise the patient to reduce the frequency of sugary snacks and drinks to prevent tooth decay.
- the risks of undergoing invasive procedures, including non-medical procedures such as body piercing or tattooing.
- ♥ For all patients at increased risk of infective endocarditis, advise them to contact their GMP as soon as possible if they notice any of the following symptoms, particularly if they occur together as a flu-like illness:
  - A high temperature (fever) of 38oC or above
  - Sweats or chills, especially at night
  - Breathlessness, especially during physical activity
  - Weight loss
  - Tiredness (fatigue)
  - Muscle, joint or back pain (unrelated to recent physical activity)
- Emphasise that these symptoms are more likely to be caused by a less serious type of infection but should be investigated.
- Ensure that the patient knows to tell any medical professional they seek advice from about any recent invasive dental treatment they may have had.
- ♥ Record all discussions with the patient in their clinical notes.
- ♥ For patients who are considering antibiotic prophylaxis as part of **non-routine management**, discuss the potential benefits and risks of antibiotic prophylaxis to allow them to make an informed decision.
  - Ensure patients are aware of the potential for hypersensitivity, anaphylaxis or antibiotic-associated colitis.
  - Ensure that the patient is aware that the antibiotic prophylaxis should be taken in the dental practice one hour prior to the planned procedure and that they will be required to stay in the practice in the intervening period.
  - Alternatively, the patient may choose to take the antibiotic at home. Consider suggesting they contact the practice prior to taking the antibiotic to confirm that the procedure will be going ahead.
  - Ensure that patients prescribed an antibiotic are aware that they should seek urgent medical attention if they develop colitis (diarrhoea, which may be severe).