Case report: management of broken dental needles in practice

Breakage of a dental needle is a rare but significant complication of local anaesthetic injections, which causes great anxiety for the patient and dental surgeon, and necessitates investigations and further treatment. It may have important medico-legal considerations. We describe a case where a dental needle broke during the routine administration of an inferior alveolar nerve block for a dental procedure. This broken needle subsequently migrated to the lateral aspect of the neck, confirming that these ‘migrations’ do occur. We discuss the various causes, and clinical and dento-legal implications, as well as methods of treatment.

An audit of orthodontic treatment eligibility among new patients referred to a Health Service Executive orthodontic referral centre

Précis

An audit of new patient orthodontic referrals showed that 29% were eligible for orthodontic treatment under HSE guidelines introduced in 2007.

Abstract

Aim: The aim of this audit was to evaluate orthodontic treatment eligibility among new patients referred for assessment from primary dental care clinics in the Health Service Executive (HSE) South region to a HSE orthodontic referral centre.

Method: A data collection form was designed and applied prospectively to consecutive new patient referrals who attended diagnostic clinics at the Orthodontic Unit, Cork University Dental School and Hospital, between October 2011 and February 2012. Orthodontic treatment eligibility was based on guidelines introduced by the HSE in 2007.

Results: Data on 291 patients (147 males and 144 females) with a mean age of 11.6 years (SD ± 2.4 years; range 8-19 years) were evaluated. Of the 83 (29%) patients eligible for orthodontic treatment under the guidelines, the most commonly diagnosed malocclusion traits were a crossbite with greater than 2mm discrepancy between retruded contact position and intercuspal position (24 patients), followed by an overjet greater than 9mm (21 patients).

Conclusions: A total of 29% of new patient referrals were deemed eligible for orthodontic treatment under HSE eligibility guidelines introduced in 2007. Reduction of new patient referrals not eligible for treatment, under these guidelines, is required to enable more efficient use of resources.

Audit of the Health Service Executive orthodontic referral pathway between 2009 and 2011 in the Dublin Mid-Leinster region

An audit was undertaken in 2009 to determine the success of the new national orthodontic referral protocol introduced to the Health Service Executive (HSE) in 2007 and operated in the Dublin Mid-Leinster HSE region. It was repeated in 2011 to determine if the HSE austerity measures have had a bearing on the orthodontic service performance in the Dublin Mid-Leinster HSE region. The audit also measured the success of referring practitioners in identifying the correct Index of Orthodontic Treatment Need (IOTN) classification of the patient. In the 2011 audit, the figures were broken down to identify the occlusal variables that caused dental practitioners most difficulties in identification.

The audit demonstrates a good referral to assessment timeframe in 2009 (85-80% compliance for IOTN 5 and 4 within three to six months, respectively), which deteriorates significantly in 2011 (26-4% for IOTN 5 and 4 within three to six months, respectively). The ability of dentists to identify the correct IOTN classification was better in 2009 (60% correct) compared to 2011 (51% correct), but both figures fell below the audit standard of 75% of referrals with correct IOTN classifications. The IOTN occlusal dental health components most readily identified by referring practitioners and meeting audit standards were 5a (overjet >9mm), 5i (impacted teeth) and 5h (extensive hypodontia). The remaining occlusal dental health components in the HSE IOTN fell below the audit standard. The audit clearly identifies a requirement for a continued educational effort to maintain the HSE IOTN skill base in primary care, and a need for additional resources to manage the demand for orthodontic assessments.

A simple technique for replacing extracted anterior teeth using a vacuum formed retainer

Précis
This article outlines the technique for providing an aesthetic replacement for anterior teeth immediately following extraction using a vacuum formed retainer filled with tooth coloured acrylic resin.