

Research brings important changes to national dentistry guidelines

September 7 2016, by Amy Pullan

Pressure from academics at the University of Sheffield and national charity Heart Research UK has helped bring about a change in advice to dentists about giving antibiotics to heart patients undergoing dental treatment.

The victory comes after research, funded by the charity and healthcare provider Simplyhealth, showed that there had been an increase in cases of the life-threatening heart condition, [infective endocarditis](#), since national health body NICE recommended in 2008 that at-risk heart patients no longer receive antibiotic cover during [dental treatment](#).

Following research, conducted by Professor Martin Thornhill of the University of Sheffield's School of Clinical Dentistry, NICE (National Institute for Health and Care Excellence) decided not to change its recommendation despite dentists in the USA and Europe routinely giving antibiotic cover to high-risk heart patients – which includes those with artificial or repaired heart valves.

Now, after pressure from the charity, Professor Thornhill and colleagues, patients and a local MP, NICE has had a change of heart and altered the guideline.

Before the change, the NICE guidelines stated that giving antibiotic cover to [heart patients](#) undergoing dental treatment was not recommended.

That recommendation has now been changed to say that dentists should not "routinely" give antibiotics to patients at risk of infective endocarditis during dental procedures. The new ruling allows flexibility so that dentists and cardiologists can recommend antibiotic cover when it is in the best interests of the patient.

Professor Thornhill said he was pleased that NICE had now taken account of the research.

"This change is most welcome. It lifts the ban on giving antibiotic prophylaxis to protect patients at risk of endocarditis and permits dentists and cardiologists to act in the best interests of patients at greatest risk of this devastating disease by providing them with the protection that is standard care in the rest of the world."

Heart Research UK National Director, Barbara Harpham, welcomed the change. "This is great news for patients and the money for this research was very well spent for our charity," she said.

"Patients at risk now have a choice and, after talking to their dentist, can make an informed decision about their treatment.

"It has taken us, and others, nearly two years of pressure to get this change and it brings us a step closer to the UK being more in line with other guidelines across the world."

In a letter to Croydon South MP Chris Philp, who raised the issue with NICE on behalf of one of his constituents, the Chief Executive of NICE Sir Andrew Dillon, said: "This amendment should now make clear that in individual cases, [antibiotic prophylaxis](#) may be appropriate".

MP Chris Philp welcomed the NICE move after taking up the issue with the organisation on behalf of Ash Frisby from Sanderstead, Surrey. She

contacted him after the death of her husband Myles from infective endocarditis. The 71-year-old had been fitted with an artificial heart valve and soon after a visit to a dental hygienist, where he was not given antibiotics, he contracted the infection and died two months later.

She said: "The devastation infective endocarditis can cause in someone with a replacement valve should not be underestimated. It was truly shocking."

MP Chris Philp said: "The evidence shows that high risk patients should receive prophylactic antibiotics and the revised NICE guidelines now allow dentists to do this. I am pleased that NICE have now finally done this and I would like to thank Prof Thornhill for his work and also Heart Research UK for funding it."

Provided by University of Sheffield

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