

Dental care and oral health under the clouds of COVID-19

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JDR Clinical & Translational Research has published an invited commentary by researchers at the University of Rochester, Eastman Institute for Oral Health, N.Y., USA on dental care and the Coronavirus

disease 2019 (COVID-19), including the provision of dental care and protecting patients and staff during the pandemic.

"The COVID-19 pandemic has exposed significant gaps in the collective response of global healthcare systems to a [public health emergency](#)," said *JDR Clinical & Translational Research* Editor-in-Chief Jocelyne Feine. "Though dentistry is a relatively small part in the COVID-19 response, [dental professionals](#) and organizations should take this opportunity to assess the role of dental care professionals in a global public health emergency."?

The authors reviewed current evidence related to the impact of SARS-CoV-2/COVID-19 on dental care and oral health with the aim to help dental professionals better understand the risks of disease transmission in dental settings, strengthen protection against nosocomial infections and identify areas of COVID-19 related oral health research.

Important issues related to [dental care](#) and oral health include:

SARS-CoV-2 is most frequently transmitted from human to human through direct contact and respiratory droplets and indirect contacts with fomites. Airborne transmission is also likely, but concrete confirmatory evidence is lacking. Both asymptomatic and pre-symptomatic patients may be major sources of SARS-CoV-2 transmission.

Evidence supports that [oral mucosa](#) is an initial site of entry for SARS-CoV-2 and that oral symptoms, including loss of taste and smell and dry mouth, might be early symptoms of COVID-19, although the mechanism and prognosis of oral symptoms of COVID-19 are not clear.

Rapid testing for [infectious diseases](#) in dental offices using saliva samples may be valuable in the early identification of infected patients and in disease progress assessment. Dental clinics and dental

professionals are not well prepared to perform aerosol generating procedures at the time of an infectious respiratory disease pandemic as they are not routinely fitted for the N95 respirators required for these procedures.

Increase research efforts in aerosol control in dental offices, including improving engineering control in dental office design. It may be time to consider negative pressure dental operatories.

Finally, [oral health](#) researchers may play a more active role in early identification and diagnosis of the disease through deciphering the mechanisms of dry mouth and loss of taste in COVID-19 patients.

More information: Y.F. Ren et al. Dental Care and Oral Health under the Clouds of COVID-19, *JDR Clinical & Translational Research* (2020). [DOI: 10.1177/2380084420924385](https://doi.org/10.1177/2380084420924385)

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