

From the desk of Editor- in-Chief.....

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The widespread transmission of SARS-CoV-2 and its reports of its spread to healthcare providers, dental professionals are at high risk for nosocomial infection and can become potential carriers of the disease of the disease. The risk including aerosol generation, handling of sharps and proximity of the provider to the patient's oropharyngeal region. Further precautions are necessary that includes careful pre- screening of patients and additional measures if treatment of patients with confirmed COVID-19 is deemed necessary. It is worth noting that case presentations can be dynamic and there is good chance that dental practices might treat some of the patients with asymptomatic COVID-19 infections since the incubation period can range from 0 to 24 days.

I advise all dental professionals to follow strict protocol for patient screening. The first screening measure would be taking the body temperature of each patient using a contact-free forehead thermometer. Patients should fill questionnaire form to determine whether they have any symptom like fever, persistent cough and difficulty breathing within past two weeks. Patients should also report if they have had any contact with person who demonstrated symptoms like fever or respiratory symptoms within last two weeks. Second point to be noted is Hand Hygiene. Reinforcement of good hand hygiene for both patient and dental professionals is vital. Third most important I believe is Personal Protective Measures for Dental Professionals. It is extremely important to implement effective PPE measures in dental care centres during this pandemic outbreak to ensure safety of both patients and the dental healthcare professionals. While starting working in the patient mouth rinse plays vital role in decreasing the viral load in the droplets and aerosols. Rubber Dam is also one of the simplest and practical ways in reducing contamination from the oral cavity. Anti-retraction Hand pieces results in significant reduction in the backflow of bacteria and from oral cavity into the tubes of hand piece. We should also follow effective and strict disinfection protocol for both clinical and communal areas. The other major portion which we all need to keep in mind is Clinical waste management which should be stored in safe temporary storage area, and all reusable instruments and items should be pre-treated, cleaned, sterilized and properly stored in accordance with local protocols.

We have to think and find out new ways to work in this pandemic like preparedness and contingency planning for modifying clinical practice, optimization of cross infection in dental centres as well as labs, further focus on prevention and oral health promotion, incorporation of modern IT methods to continue our academics at this pandemic, increased role of tele-medicine and further which I always promote is further investment in relevant dental research fields.

*“One of the best aspects of health care reform
Is it starts to emphasize prevention”*

Your's:

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Editor-in- Chief

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