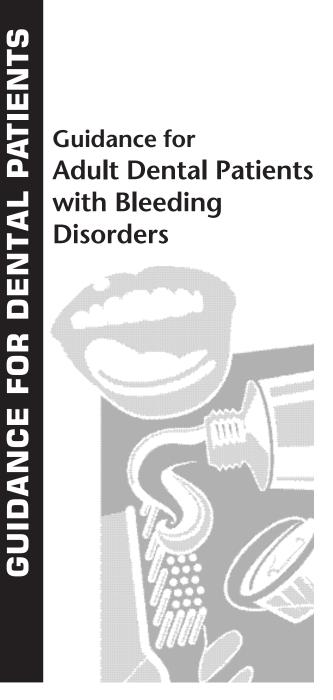
**Further information** 

If you have any questions about your dental treatment please contact your local Haemophilia Centre for advice. (Please see below).

Haemophilia Centres



NHS



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You have been diagnosed as suffering from haemophilia or another bleeding disorder. It is very important that you receive regular dental care. This leaflet will be able to help you plan your treatment.

We advise everybody to see their dentist every six months if they have their own teeth or every two years if they are wearing dentures.

It is important to understand that you may not need to attend the hospital for all of your dental treatment.

#### Prevention of dental problems

Everybody is at risk of dental problems. However, the management of certain types of dental disease may cause bleeding. Therefore, preventing dental disease is very important. The most common diseases are periodontal disease (gum disease), dental decay and tooth wear.

# **Dental Treatment**

The majority of your treatment will not cause significant bleeding and may be carried out by a general dental practitioner (dentist) or within the public dental service.

• Prevention Advice

At each appointment your dentist will talk to you about preventing dental problems. This may include information about your diet and advising on the use of fluoride toothpaste and other treatment where appropriate.

### • Orthodontic Treatment

There are no problems with you receiving orthodontic treatment using either a fixed or removable appliance. It is important that there are no sharp edges which might cause bleeding.

• Hygiene Therapy (e.g. scale and polish) It is very unlikely that the routine cleaning of your teeth will cause any prolonged bleeding.

However, if you have serious inflammation of the gums (gingival) or gum disease, you may need factor replacement therapy to control any bleeding. You may need to be referred to the hospital for treatment.

- **Removable Denture (e.g. false teeth)** Treatment is unlikely to cause any problems.
- Restorative Dentistry

Restorative dentistry, including the provision of crowns and bridges, can be carried out safely as long as your dentist follows the local anaesthetic guidelines.

• Root Fillings

The placement of root fillings should not cause any problems. On occasions it may be necessary to apply a medication into the root canal before completing the treatment.

# • Extractions (having a tooth removed) and Surgery

In most cases this will have to take place in the hospital environment so that you can receive the appropriate factor replacement therapy and after care. Your haemophilia centre will confirm this.

# Local Anaesthesia

If you need local anaesthetic, your dentist (general dental practitioner) will need to follow the local anaesthetic guidelines.

The following are local anaesthetic techniques and advice as to the need for factor replacement therapy.

# Local Anaesthetic Techniques

**Buccal infiltration** - this is when you have anaesthetic near the side of the tooth next to the cheek. You should not need factor replacement therapy.

**Intra-papillary injections** - this is an injection into the gum between the teeth. You should not need factor replacement therapy.

**Intraligamentary Injections** - this is an injection into the space between the tooth and the bone. You should not need factor replacement therapy.

Lingual infiltration - this is when you have anaesthetic at the side of the tooth next to the tongue. You may need factor replacement therapy.

Inferior Dental Block - this is an injection where your bottom jaw including the lips and tongue are numb. You may need factor replacement therapy.