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ROLE OF LASER IN DENTISTRY

Mohannad El Akabawi Misr University for Science and Technology, Egypt

aser systems and their application in dentistry and ■especially oral surgery are rapidly improving today. The diode laser was introduced in dentistry and oral surgery in the mid-90s. The diode laser devices have specifications such as relatively small size, portable and lower cost that attract the dental practitioners and oral surgeons for use in various surgical indications in comparison to other laser equipment. Diode laser with wavelengths ranging from 810 to 980 nm in a continuous or pulsed mode was used as a possible modality for soft tissue surgery in the oral cavity. Based on the photothermal effect of the diode laser, the lesions of the oral mucosa are removed with an excision technique, or by ablation/vaporization procedures. Applications of lasers in dentistry is soft tissue surgery and ablation of lesions and the excision of exophytic lesions is one of this utilization, provided correct selection and application of diode lasers in soft tissue oral surgery, for example frenectomy, epulis fissuratum, fibroma, facial pigmentation and vascular lesions. The advantages of laser application are relatively bloodless surgery, minimal swelling, scarring and coagulation, no need for suturing, reduction in surgical time and less or no post surgical pain. Also, the laser instantly disinfects the surgical wound as well as allowing a noncontact type of operative procedure and therefore no mechanical trauma to the tissue.

dr.mohannad1711@gmail.com

MENTAL HEALTH ISSUES AND SPECIAL CARE PATIENTS

David B Clark
University of Toronto, Canada

sychiatric illness and its medical management carry significant risks for oral disease. Although mental illness is common, in many cases it is misunderstood, remains unrecognized, or is undertreated. Mental illness and the resulting disabilities create difficulties not only for the patient but also for one's family and friends, not the least of which remains the highly stigmatized nature of the disease itself. Understanding the type, severity, stage of mental illness, along with a patient's own mood, motivation and personal perceptions of oral disease and lifestyle can enhance the knowledge of dental professionals concerning this critical aspect of a patient's medical history and further illustrates how closely mental health and oral health are intertwined. Mental illness must be viewed from a similar perspective as are other major diseases. Dental professionals should be aware of factors such as the reduced rates of compliance with dental treatment, reduced ability to access oral health care, the effects of various psychotropic medications on oral health including xerostomia, caries and periodontal disease and the potential interactions with drugs used in dental practice. Patients with psychiatric illness often bring unique needs and differing priorities to a dental practice, and the dental health practitioner must in turn demonstrate patience, flexibility, empathy, and a non-stigmatizing attitude in caring for these individuals. Enhancing self-esteem and feelings of self-worth for those coping with a psychiatric illness can be a very fulfilling experience that can only serve to continue to break down the stigma surrounding this group of diseases.

davidclark1461@gmail.com