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Angus Walls, Director

COVID-19 Update No 9

Edinburgh Dental Institute
4th Floor Lauriston Building
Lauriston Place
Edinburgh EH3 9HA

+44 (0)131 536 4975
angus.walls@nhslothian.scot.nhs.uk

Content of this update

- Update on the Urgent Dental Care Centres
- Update on prescribing

Dear Colleagues,

Update on the Urgent Dental Care Centres

The Urgent Dental Care Centres are running smoothly at present, we are receiving a steady flow of requests for patients to be seen and are seeing a slowly growing number of people, largely for tooth extractions with a small number of dental trauma cases. We do not have a problem with the availability of PPE nor do we have a problem currently with capacity in the system.

I am aware of some concerns expressed through social media or to the DPAs about the care that is offered to your patients and whenever we become aware of a concern we reach out to the practitioner involved to ask for details so that we can investigate what has happened and try to improve what we are doing. Please feed back your concerns to me so that we can make the service better. I am not allowed to respond about a specific patient unless you contact me from a secure email address so either nhslothian.scot.nhs.uk or nhs.net so that the correspondence is secure. Please also remember that we are not trying to replicate the normal Out of Hours or unscheduled care service here, we are working to the guidance from SDCEP about who we should see and when.

Update on prescribing

One of the continuing challenges we face is prescription of lower dosages of antimicrobials than recommended by SDCEP please remember that the recommended dose of Metronidazole is 400mg TDS for 5 days and Amoxicillin is a minimum of 500mg TDS and up to 1g TDS for "severe infection". I have appended the recent SDCEP update to this email for your reference.

Explicitly 200mg of Metronidazole is regarded as a sub-therapeutic dose which will have limited effect and will increase the risk of bacterial resistance.

When we are asked to see a patient who has been taking a sub-therapeutic dose of antibiotic we will not see them to extract a tooth, rather we will prescribe the correct dose and see if this brings the infection under control. Prescribing a sub-therapeutic dose of antimicrobials will simply result in a delay in care or symptomatic relief for your patient.



A second area of concern coming into this crisis was the use of ibuprofen in people who had symptoms of COVID-19 infection. These concerns were based on relatively weak evidence from the SARS outbreak in the early 2000s. I append a letter that came out 2 days ago confirming that there is NO evidence of concern with regard to the use of ibuprofen in the current pandemic.

Thank you all once again for your support during this pandemic, there are discussions ongoing how we try to bring dentistry out of this and there will inevitably be a time when restrictions start to be lifted on what can be done and where. When that time comes we will work with you all to continue to deliver the best service that we can. This may involve some sort of hybrid model from where we are now and when there is an expansion in the procedures that can be offered safely the current provisions could not cope so we will need your support at that stage.

Finally I would like to thank those of you who have volunteered to support LUCS (which is the Medical Out of Hours Service) this weekend by collecting and delivering prescriptions to vulnerable people in NHSL

With all my best

Angus Walls