

AEROSOLS IN DENTISTRY

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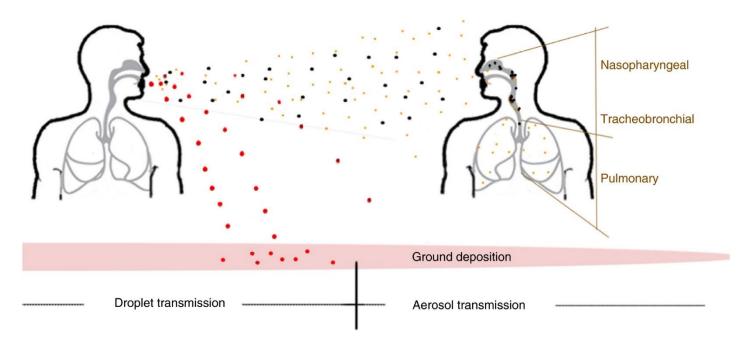
Content 1 **Basic** information Methodology of bacterial aerosol ? How much aerosol is generated in the dental office? Recommendation for safe work in the dental office

DEFINITION



Aerosols = liquid or solid particles suspended in the air by humans, animals, instruments, or machines. Bio-aerosols = aerosols containing particles of any kind of organism.





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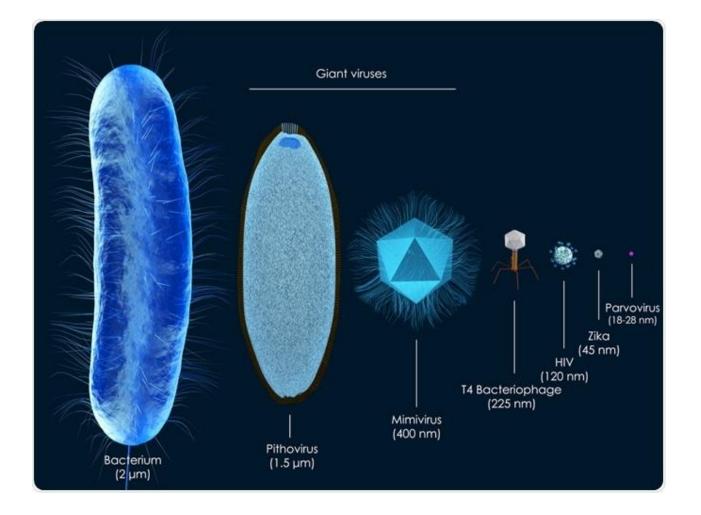
MED

- Aerosol particles less than 5 µm in diameter
- Splatter particles larger than 5 µm in diameter

SIZE COMPARISON

Aerosol particles: < 5 μ m

Mycobacterium tuberculosis: 2 µm Staphylococcus epidermidis: 1,5 µm Coronaviridae: 90-150 nm Influenza viruses: 80-120 nm

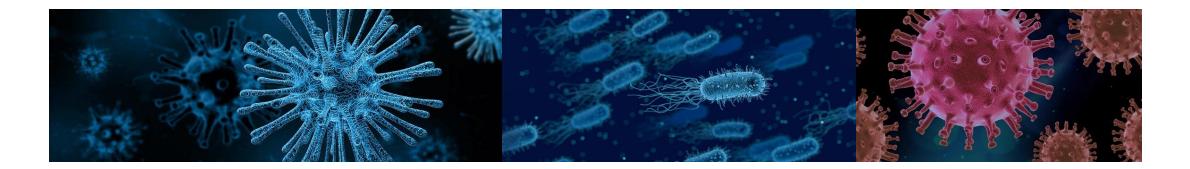


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DISEASES KNOWN TO BE SPREAD BY DROPLETS OR AEROSOLS

Tuberculosis, Influenza, Legionnaires' Disease, Severe Acute Respiratory Syndrome, Measles, Pneumonic Plague,

diseases caused by herpetic viruses (Varicella Zoster Virus), rhinoviruses



 $M \vdash D$

6 Reference: Aerosols and splatter in dentistry (2004) <u>https://jada.ada.org/article/S0002-8177(14)61227-7/fulltext#cesec60</u> Particle sizes of infectious aerosols: implications for infection control (2020)

INFECTIOUS AEROSOLS IN DENTAL ENVIROMENT

What is the composition of contaminated droplets or aerosols?

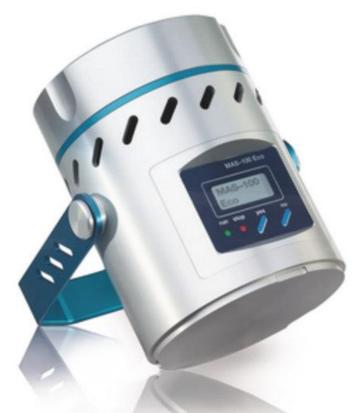
Bacteria N = 19					
Gram negative		Gram positive			
Acinetobacter wo <mark>lf</mark> îi		Staphylococcus capitis	Staphylococcus chromogenes	Micrococcus luteus	Diphteroids
Legionella spp.		Staphylococcus lentus	Staphylococcus haemolyticus	Micrococcus spp.	Corynebacteria
Pse <mark>udomonas aureus</mark>		Staphylococcus xylosus	Staphylococcus epidermidis	Micrococcus lylae	Bacillus spp.
Staphylococcus aureus			Staphylococcus fominis	Bacillus pumilus	Actinomycetes
Viruses N = 0					
None reported					
Parasites N = 0					
None reported					
Fungi N = 23					
Alternaria alternata	Aspergillus flavus	Cladosporium cucumerinum	Geotrichum spp	Stemphylium spp	
Alternaria brassicicola	Aspergillus fumigatus	Cladosporium ramotenellum	Monocillim indicum	Stemphylium spp	
Alternaria citri	Aspergillus niger	Cladosporium sphaerospermum	Monodictys glauca	Ulocladium alternariae	
Arthrinium phaesospermum	Botrytis spp	Cladosporium spp	Pencillium spp		
Aspergillus	Cladosporium cladosporiodias	Cladosporium spongiosum	Penicillium chrysogenum		



AEROSOL SAMPLING METHODOLOGY

Passive air sampling Active air sampling (air sampler)





Note: viral particles such as influenza, rhinoviruses, SARS coronavirus and bacteria such as Mycobacteria tuberculi and strict anaerobic bacteria could not be measured if common culture medium and cultivation conditions were used.

PILOT MEASUREMENT OF BACTERIAL SPLATTER IN THE ENVIRONMENT OF A DENTAL CLINIC (JUNE 2021)

The number of bacterial droplets in dental office depending on the distance of the source.

The highest concentration of produced particles is close to the head of a patient.

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CFU 6 1,2 m DH b **CFU 10** 50 cm а 25 cm CFU 7 **CFU 20** 1,2 m e CFU 6 3 m

door

window

CFU = colony forming unit Source: Measurements for the pilot study, passive air sampling (Department of Public Health, MUNI) ...UNI Med











WRONG

RIGHT

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12 Dental office

- 1) Reduction or avoidance of droplet/aerosol generation
- 2) Use of rubber dam isolation
- 3) Use of pre-procedure mouthwash
- 4) Dilution and efficient removal of contaminated ambient air
- 5) Disinfect air/aerosol generated
- 6) Adoption of contact precautions

1) Reduction or avoidance of droplet/aerosol generation

• Aerosol and splatter generation is inevitable when ultrasonic scalers, rotary brushes and air prophylactics are used. Avoid the use of rotary handpieces for operative procedures if possible.

- 1) Reduction or avoidance of droplet/aerosol generation
- 2) Use of rubber dam isolation

• Rubber dam effectively isolates the operating field and its use is well known to prevent or minimise the generation of potentially infectious splatter and aerosol

- 1) Reduction or avoidance of droplet/aerosol generation
- 2) Use of rubber dam isolation
- 3) Use of pre-procedure mouthwash

• A pre-procedural 0.12% chlorhexidine mouth rinse can reduce the microbial load of saliva, and by implication a resultant aerosol due to instrumentation. Although the effect of chlorhexidine gluconate on human coronavirus is unknown it is effective against many respiratory viruses, like herpes and HIV

- 1) Reduction or avoidance of droplet/aerosol generation
- 2) Use of rubber dam isolation
- 3) Use of pre-procedure mouthwash
- 4) Dilution and efficient removal of contaminated ambient air
 - *High volume evacuation (HVE)*
 - General ventilation
 - Air filtration (HEPA filters)

- 1) Reduction or avoidance of droplet/aerosol generation
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- 5) Disinfect air/aerosol generated
 - Ultraviolet germicidal irradiation (UVGI)

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- 6) Adoption of contact precautions
 - Personal protection equipment (PPE)
- 19 Zdroj: Severe Acute Respiratory Syndrome (SARS) and the GDP. Part II: Implications for GDPs (2004)

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It is good to know...



...humans produce infectious aerosols in a wide range of particle sizes, but pathogens predominate in small particles (< 5 μ m) that are immediately respirable by exposed individuals.



...proper hand hygiene is still one of the most important factors in preventing the spread of infectious diseases. Remember, all surfaces in your dental office are covered with aerosol and droplets.