

## Dental care with a bleeding disorder

Prevention of dental problems is very important. The fewer tooth problems a child has, the fewer repairs are needed, and the less bleeding will occur. The three most important things to do are:

- Brush teeth twice a day.
- Floss teeth once a day.
- Get regular dental check-ups.

Your child should have the first dental visit between the second and third year of age; earlier if there are tooth problems or decay.

### What should I do if my child needs dental work?

If your child has a **venous access device**, call your hematologist for an antibiotic prescription. Give the antibiotic by mouth one hour before **any** dental work such as cleaning, fillings, or tooth extractions (removal).

Treatment for bleeding is seldom needed for:

- dental cleaning (some oozing may occur, but it is not usually a problem)
- braces

For other dental work:

1. Tell your hematologist about any planned dental work, other than cleanings. If your child needs teeth extracted, tell the doctor how many, and whether they are primary (baby) or secondary (permanent) teeth.

2. The doctor will decide whether factor or medicines are needed to prevent or stop any bleeding. Please see the chart on the next page for possible treatments.

### What else do I need to know?

Do **not** give aspirin or non-steroidal anti-inflammatory medicines (such as Advil®) to a child with a bleeding disorder.

Most tooth extractions and fillings are done in the dental clinic. Children with any of the following may have the dental work under anesthesia and need to stay overnight in the hospital:

- multiple extractions
- multiple fillings or crowns
- dental nerve block
- if child has an inhibitor

An Amicar® rinse may be used to treat persistent mouth bleeding.

### Questions?

This sheet is not specific to your child, but provides general information. If you have any questions, please call your clinic. For more information about bleeding disorders the following Web sites are available:

- [www.cdc.gov](http://www.cdc.gov)
- [www.hemophilia.org](http://www.hemophilia.org)

For more reading material about this and other health topics, please call or visit the Family Resource Center library, or visit our Web site: [www.childrensmn.org](http://www.childrensmn.org).

## Bleeding due to dental work: Treatment

Treatment depends on the type and severity of bleeding disorder and how much dental work is needed. The hematologist will determine what treatment is needed. This chart lists some general guidelines.

| Type of bleeding disorder | Type of dental work                                     |                                  |   |
|---------------------------|---|----------------------------------|---|
|                           | Filling cavities  | Primary (baby) tooth extractions | Secondary or difficult tooth extractions  |
| Hemophilia                |   |                                  |   |
| Mild                      | Amicar, DDAVP, and/or factor concentrate may be needed. | DDAVP and/or Amicar              | Amicar, DDAVP, and/or factor concentrate.<br>Continue Amicar for 3 to 7 days.<br>May need a second dose of Factor or DDAVP in 12 to 48 hours. |
| Moderate<br>Severe        | Factor  | Factor and Amicar                |   |
| Von Willebrand disease    |   |                                  |   |
| Mild                      | Treatment not usually needed.                           | No treatment needed.             | DDAVP and Amicar.<br>Continue Amicar for 3 to 7 days.   |
| Moderate<br>Severe        | Factor or DDAVP if a dental nerve block is used.        | Factor or DDAVP and Amicar       | Factor concentrate may be needed if no response to DDAVP, or for severe disease.  |

**Note:** DDAVP is only used in children with mild hemophilia and some types of Von Willebrand's Disease.

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