

ONJ UPDATE 2024

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Abstract Submission FORM

FOLLOW-UP AND TREATMENT OF THE 2023 MRONJ PATIENTS REFERRED TO SANT'ANDREA HOSPITAL, VERCELLI

SECTION: 3A

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Background: Medication-related osteonecrosis of the jaw (MRONJ) is a severe adverse condition primarily associated with antiresorptive and antiangiogenic drugs, affecting the maxillofacial region (1). It is characterized by the presence of necrotic bone in the maxilla or mandible that fails to heal over a period of eight weeks in patients exposed to these medications, without any history of radiation therapy to the craniofacial region. The pathophysiology of MRONJ remains complex, involving inhibition of bone remodeling, angiogenesis disruption, and immune modulation. Early diagnosis and interdisciplinary management are crucial for improving outcomes. This work aims to report the activities conducted at the SCU of Odontostomatology at Sant'Andrea Hospital in Vercelli regarding patients scheduled to begin or already undergoing antiresorptive drugs therapy. Since 2018, the clinic has been engaged in the prevention and treatment of osteonecrosis caused by bone antiresorptives. Agreements were made with oncology and rheumatology departments in order to screen patients who are about to start or are already undergoing antiresorptive therapy.

Patients and methods.

In 2023, a total of 352 patients regarding MRONJ prevention and follow up have been referred to the clinic, 254 of these have accessed for the first time, 98 were known patients referring for follow-up. 196 patients were already undergoing antiresorptive drugs and 156 were patients that needed to start antiresorptive therapy. 180 of these were oncologic patients, and 172 had osteoporosis or other diagnoses. Out of these, 11 patients developed osteonecrosis. All patients were enrolled in a biannual dental hygiene control program, which included the compilation of a periodontal record with the measurement of indices such as PCR (Plaque Control Record), GBI (Gingival Bleeding Index), OHI-S (Oral Hygiene Index Simplified), and WTCI (Winkel Tongue Coating Index).

Results.

This consistent monitoring showed improvement in all indices, particularly: PCR from 67.48% to 46.66%, GBI from 10.50% to 7.80%, OHI-S from 2.60 to 1.66, and WTCI from 6.18 to 5.73.

Among the 11 patients that developed osteonecrosis of the jaws 8 have been successfully treated and 3 referred to the SCU of Maxillofacial Surgery in Novara

The diagnostic classification, therapy, and follow-up were established according to the guidelines drafted by the Italian Society of Oral Pathology and Medicine (SIPMO) and the Italian Society of Maxillofacial Surgery (SICMF) in 2020.

Conclusions.

Despite the established network and the growing importance of MRONJ, it is not uncommon to encounter patients who have already begun treatment with bone antiresorptives and have evident oral foci needing treatment. Our aim is to focus on the importance of prevention and early diagnosis, in order to reduce as possible complications such as MRONJ.

REFERENCES:

1. Campisi G, Bedogni A. et Al Medication-Related Osteonecrosis of Jaws (MRONJ) Prevention and Diagnosis: Italian Consensus Update 2020. *Int J Environ Res Public Health*. 2020 Aug 18;17(16):5998. doi: 10.3390/ijerph17165998. PMID: 32824826; PMCID: PMC7460511.

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