

# ONJ UPDATE 2024

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### Abstract Submission FORM

#### THE PREVENTION OF MEDICATION-RELATED OSTEONECROSIS OF THE JAWS: OUR EXPERIENCE

SECTION: *Esperienze di prevenzione (pre-trattamento con farmaci) e/o follow-up*

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**Background.** Dentists have a pivotal part to play in minimizing patients' risk of development of MRONJ. Studies have shown that the risk of developing the condition can be substantially reduced if patients are assessed by a dental professional and preventive measures are taken. The duration of low-dose bisphosphonate or denosumab exposure beyond which the risk of development of MRONJ is high varies among studies. High-risk patients that are going to be prescribed antiresorptive drugs for osteoporotic or cancer indication should undergo a thorough dental assessment, including dental radiography, before treatment with bisphosphonates or denosumab is initiated: in particular, they should undergo an oral examination and appropriate preventive dentistry, including regular professional oral hygiene follow up, together with oral hygiene oral instructions and motivation. Consequently, the patient should be referred to a dentist by the treating physician.

The aim of this communication is to present our experience in the prevention of MRONJ by the implemented diagnostic - therapeutic - assistential pathways for patients that are going to assume antiresorptive drugs in Novara University Hospital.

#### **Patients and methods.**

The clinical diagnostic - therapeutic - assistential pathways for patients that are going to assume antiresorptive drugs in Novara University Hospital are presented. The flow charts of cancer treatment-induced bone loss (CTIBL) pathway and bone metastasis pathways will be described. A revision of the study population of patients that are going to assume antiresorptive drugs in a single University third level center was performed, since January 1st 2017 to today. The medical charts were analyzed and the following data were recorded for each patient: gender, age, diagnosis, prescribed antiresorptive drug, treatment, outcome.

#### **Results.**

During the considered time frame, 523 patients underwent a preventive dental assessment, that was followed by a regular professional oral hygiene follow up, the extraction of compromised teeth, and conservative dental procedures for dental cavities.

#### **Conclusions.**

Minimizing the risk of MRONJ is crucial, both to prevent the pain and discomfort the disease can cause patients and to increase the benefit of treatment with antiresorptive drugs. By the assessment, the prophylactic dental treatment, and the close multiprofessional teamwork, the risk of developing this condition may be decreased. It is fundamental that dentists are able to identify patients at risk and that they are familiar with the required prophylactic treatment recommendations,

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