Research Article AJSRR (2018) 1:3



American Journal of Surgical Research and Reviews (DOI:10.28933/AJSRR)



A Dentist Surgeon Conduct With Diabetic Patients

Lima L.F.A.1, Santos G.A.S.2, Santana J.F3, França L.C4, Ramos L.V.S5, Maia C.S6

1,2,3,4,5Student Dentistry Course / UFP 6Teacher/Researcher Department of Histology and Embryology / UFPE

ABSTRACT

Introduction: When treating a diabetic patient, it is important to consider a number of factors, such as the patient's blood glucose behavior and rate. Objectives: To approach as situations and behaviors of the dental surgeon towards the diabetic and to explain actions that will lead to success without patient care. Methodology: A bibliographic review was done in the virtual libraries SCIELO and PubMed, use the articles: "Diabetes and Dentistry" and "Conduct of diabetics in dentistry". It was used as inclusion criteria for published articles from 2013 to 2017, in the Portuguese and English languages, which relate diabetes to dentistry and conduct of the dental surgeon. Results and Discussion: The survey resulted in 3,011 articles, 18 of which were separated by presenting a greater relation with the subject, but only five attendants to the inclusion criteria. The most common clinical sign in diabetic patients is hypoglycaemia, causing pallor, cold sweat, drowsiness, headache and others. In case of unconsciousness or dental surgeon, administer ampoule with 10 ml of 25% glucose solution intravenously. Hyperglycemic patients show signs and symptoms characteristic of metabolic ketoacidosis, such as the presence of a hetero-oesthetic should be referred to the doctor. The dentist should suspect undiagnosed cases, ask about polyphagia, polydipsia, polyuria, and weight loss. If so, refer to laboratory tests and doctor. Controlled diabetics may be treated in a similar manner to the non-diabetic patient. Prioritize short appointments early in the morning after a meal. Normal diet is advised in the diet. An antibiotic prophylaxis for certain passages can be made. Oppose the blocking anesthesia, avoiding solutions with vasoconstrictor based on adrenaline, because we promote the breakdown of glycogen into glucose, causing hyperglycemia. Conclusion: The dental surgeon must know the systemic associations of diabetics in order to serve them more safely in all clinical procedures.

Keywords: Dental surgeon; Conduct; Diabetes

*Correspondence to Author:

Lima L.F.A.

Student Dentistry Course / UFPE

How to cite this article:

Lima L.F.A., Santos G.A.S., Santana J.F, França L.C, Ramos L.V.S, Maia C.S.A Dentist Surgeon Conduct With Diabetic Patients. American Journal of Surgical Research and Reviews, 2018, 1:3



policy-disclaimer/