## **Oral Health Literacy Message: Conversations with Patients about Dental Fillings**

On September 24, 2020, the Food and Drug Administration (FDA) released a safety communication with <u>recommendations for the use of dental amalgam in certain high-risk populations</u>. In this message the FDA identified seven high-risk groups:

- Pregnant women and their developing fetuses;
- •Women who are planning to become pregnant;
- •Nursing women and their newborns and infants;
- •Children, especially those younger than six years of age;
- •People with pre-existing neurological disease;
- •People with impaired kidney function; and
- •People with known heightened sensitivity (allergy) to mercury or other components of dental amalgam.

Two key sentences that summarize the FDA's statement are:

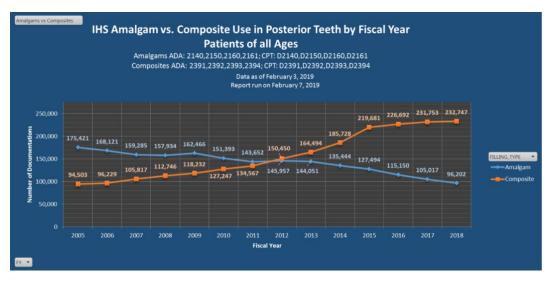
Although the majority of evidence suggests exposure to mercury from dental amalgam does not lead to negative health effects in the general population, little to no information is known about the effect this exposure may have on members of the specific groups listed above who may be at greater risk to potential negative health effects of mercury exposure. Accordingly, the FDA recommends that nonmercury restorations (fillings) such as composite resins and glass ionomer cements be used, when possible and appropriate, in people who may be at higher risk for adverse health effects from mercury exposure.

As IHS, Tribal and Urban (I/T/U) dental providers, how should we communicate with our patients about dental restorations? We have the obligation to inform our patients of risks and benefits of each treatment option and give them the opportunity to ask questions so they can make an informed decision.

Recommendations for conversations with patients about dental restorations:

- Discuss risks and benefits of potential dental restorations.
- For FDA defined high-risk patients based on medical history and conversation have a more in-depth discussion about risks and benefits. This is similar to conversations with patients considering an extraction who have diabetes or are taking bisphosphonates.
- Document your discussion in the clinical note, ideally using a template. For example, the note could say "advised patient of the risks and benefits of amalgam and composite restorations. Patient chose \_\_\_\_\_\_."
- Consider a <u>patient education handout</u>, if patients have additional questions.

The use of dental amalgam at I/T/U dental clinics has steadily decreased over the last decade, with composite restorations becoming the most common posterior restorations in 2012:



For more information on amalgam, including additional graphs, visit the <u>IHS Dental Portal – Amalgam</u> <u>section</u>.

Resources:

FDA: Information for Patients About Dental Amalgam Fillings

<u>Recommendations About the Use of Dental Amalgam in Certain High-Risk Populations: FDA Safety</u> <u>Communication</u>

IHS Dental Portal – Update on Dental Amalgam