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CORONAVIRUS X ORTHODONTICS: WHAT WE NEED TO KNOW ABOUT IT!!!

The year 2020 will be marked in History by the coronavirus pandemic, which completely changed the lives of everyone on Earth. As we all know, the disease is highly contagious, transmitted by asymptomatic carriers via aerosol and droplets. The practice of social detachment, keeping a distance of 1 to 2 m between people, is widely recommended to slow or stop the spread of the virus. In orthodontic practice, this distance is difficult to maintain, given the need for orthodontic maintenance, which places orthodontists at high risk of acquiring and transmitting the infection. Much has been said about the coronavirus in general, however, information is still scarce when it is correlated with orthodontic practice. With the proposal of starting the discussion on the topic, an Arab researcher¹ carried out a literature review with the objective of informing orthodontists about the appearance, epidemiology, risks and precautions during the disease crisis. For this purpose, a literature search was performed in the PubMed, MEDLINE, Scopus and Google Scholar databases. The author highlighted the need to implement rigorous infection control measures, minimizing personal contact and the production of aerosols, since these are the keys to avoid contamination within orthodontic offices. The author also points out that although no case of COVID-19 cross-transmission in an orthodontic office has been reported, the risk exists and the disease is still emerging.

THE CORONAVIRUS PANDEMIC GENERATES ANXIETY FOR ORTHODONTIC PATIENTS

As aforementioned, the coronavirus pandemic has impacted human relations in the four corners of the world. The need to isolate oneself avoiding contagion can also cause disorders and anxieties in the patient/orthodontist relationship. With the proposal to evaluate such aspects,

a group of Brazilian researchers developed a study² whose proposal was to evaluate the impact of the coronavirus pandemic and quarantine on orthodontic consultations and patients' anxiety and concerns regarding orthodontic treatment. To this end, a research was conducted in private dental clinics whose patients were in active orthodontic treatment. An anonymous online questionnaire was applied about their anxiety regarding the coronavirus situation, availability/acceptance to attend to an appointment, among others. The authors concluded that quarantine due to the coronavirus pandemic had an impact on orthodontic consultations and on patients' anxiety. Women were more anxious than men about the coronavirus pandemic, quarantine and impact on their orthodontic treatments. Treatment delay was the major concern of patients undergoing orthodontic treatment.

ORTHODONTISTS ANXIOUS AND CONCERNED ABOUT THE PANDEMIC

The transmission of coronavirus usually occurs through the air or through personal contact with contaminated secretions, such as droplets of saliva, sneezing, coughing, phlegm, close personal contact, such as touching or handshaking, contact with contaminated objects or surfaces, followed by contact with the mouth, nose or eyes. The mouth is our area of operation, making Dentistry among the health areas with the highest risk of contamination and virus transmission. This finding impacts all of us, and can generate anxiety and fear of returning to professional practice. On this occasion, Italian researchers developed a study³ that aimed to investigate the anxiety of dentists regarding the return to their daily clinical activities and risk perception for them in relation to orthodontic procedures. For this, an online questionnaire was applied to Italian dentists during the last days of lockdown, with items about anxiety, fear, anguish, perceived risk for operators and concerns about orthodontic patients during the

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outbreak of COVID-19. The results showed that Italian dentists were very afraid to return to their daily activities because they considered that upon returning to work the risk of contamination for them and their families would be increased. The authors also concluded that dentists with exclusively orthodontic activity were forced to increase their working days during the week.

WHATSAPP, AN ALLY IN TIMES OF PANDEMIC

With the worsening of the pandemic, the most severe social distance, called lockdown, is now considered as a measure to prevent a greater number of contamination by the new coronavirus. Elective health treatments must be rethought and postponed. However, orthodontic treatment, which despite being elective in many cases, is still ongoing. What to do when presenting emergencies? With the proposal of clarifying to clinical orthodontists how to behave in this pandemic period, researchers from an American university published a brief summary⁴ of the guidelines on orthodontic management during the coronavirus pandemic, focusing on virtual assistance to patients when they are prevented from coming to us. After searching the literature, the authors concluded that a good method for managing emergencies in this period when physical encounters are impossible is to reassure and monitor patients remotely using the WhatsApp application. The orthodontist should not let the patient use anything that may generate urgencies in the office, such as orthodontic elastics, facemasks, extraoral appliances, active lip plates or other non-removable accessories that can be activated by the patient. In emergency cases with the need for face-to-face assistance, it is essential to use specific personal protective equipment (PPE) for the occasion, following the guidelines dictated by WHO and local agencies.

LIVE, AN AUXILIARY TOOL IN THE TEACHING OF ORTHODONTICS

In times of pandemic, how do you maintain the teaching of Orthodontics? Despite the extensive workload dedicated to theoretical teaching, Orthodontics as well as other dental specialties requires laboratory practice prior to clinical care. How is the teaching of students in face of the impossibility of face-to-face meetings? In search of answers to this question, Turkish researchers developed a study⁵ that aimed to evaluate the effects of a live video teaching tool on the performance of dental students in the folding of an orthodontic arch. The study

involved 135 fourth-year dentistry undergraduate students. After exclusions, 116 individuals were randomly divided into two groups: Control (n = 58), in which the demonstration was performed live; and Experimental (n=58), in which the demonstration was performed on a Live. After that, the participants were evaluated regarding the execution of the orthodontic arch folding procedure. The results showed that the live video technique proved to be as effective as a conventional live demonstration for the practical teaching of orthodontics. Thus, the authors suggest that both techniques can be used as an appropriate method for training in orthodontic wire folding.

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