

December 21st, 2011

Re: Antibiotic prophylaxis for patients who have had Bio-Alcamid injections into their cheeks

Dear Dentist,

We have just completed a 4-year follow up analysis of our randomized controlled trial of the use of Bio-Alcamid. 15.6% (5/32) of our patients had confirmed infections and another 9.4% had possible infections (3/32) in the facial areas related to Bio-Alcamid injections. It was very suggestive that the infections were related to dental work (including dental cleaning) (100% of those with confirmed infections had preceding dental work). Due to these findings, we are recommending antibiotic prophylaxis for patients who have had Bio-Alcamid injected into their cheeks. You can choose the antibiotic you deem most suitable. The organisms found in our study varied from skin flora (i.e. Staphylococci) to gram negative bacteria. Those infections where bacteria did not grow could have been oral flora. Due to this finding of varied organisms, we are recommending a broad spectrum antibiotic such as cephalexin, amoxicillin or amoxicillin/clavulanic acid; for patients with penicillin allergies, clindamycin is an excellent second choice.

In summary, we are recommending antibiotic prophylaxis before dental work. We recommend either cephalexin 2 GM X 1 dose or amoxicillin 2 GM X 1 dose or amoxicillin/clavulanic acid 2 GM/500 mg X 1 dose 1 hour before the procedure. However, gastrointestinal side effects including nausea and diarrhea may occur with the latter choice. The first two choices would be consistent with the antibiotic prophylaxis recommended for patients with prosthetic joint replacements. If the patient is allergic to penicillin or amoxicillin or cephalexin, clindamycin 600 mg X 1 dose can be used.

This note is to replace our last letter created and distributed on November 3rd 2009 and all preceding letters.

We continue to stress that these patients require your attention when giving anaesthetic injections; he/she should not receive injections into the upper gums leading into the cheek area as it can puncture the intact capsule and put the prosthetic at risk of infection.

We also continue to recommend that the patient should not have facial X-rays of cheek area as it can degrade the capsule (these are X-rays that would be done after a serious trauma and most often done in hospital). X-rays of the teeth that are carried out in dental offices are fine.

Kindest Regards,



Mona Loutfy, MD FRCPC MPH