



Preface

Infections, infectious diseases and dentistry, part II



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Guest Editor

New and re-emerging infectious diseases challenge health care providers to acquire newer, more sophisticated, and more extensive resources than ever before. This issue of the *Dental Clinics of North America* focuses on several topics that are of particular interest to oral health care providers.

The analytic process required to evaluate and assess infectious diseases requires not only clinical acumen but also knowledge of available laboratory tests that can assist and confirm a diagnosis. Dr. John Molinari covers this topic in his article on diagnostic modalities for infectious disease.

A very real emerging problem is the use and abuse of antibiotics. Dentists are not generally recognized as primary culprits of causing antibiotic resistance by indiscriminate prescription practices, but oral health care providers need to recognize the phenomenon of antibiotic resistance to prescribe appropriate medications. Dr. Tom Pallasch explores the concerns of antibiotic resistance and antibiotic prophylaxis in his two articles on these topics.

Oral health care providers are exposed to occupationally potential harmful infectious agents and need to know how to protect themselves, their staff, and their patients. Infection control measures have over time become an essential and integral part of every dental practice. With new knowledge about infectious agents with potential for transmission in dental settings, as well as better knowledge about the efficacy of postexposure measures, guidelines are constantly appraised and updated. These timely topics are thoroughly reviewed by Dr. Jennifer Cleveland and Kathy Eklund.

In the article on opportunistic infections in immune compromised patients, Drs. Ernesta Parisi and I address concerns facing dentists providing dental care for patients who are more susceptible to acquire infectious pathogens in a dental setting. Different types of immune suppression are discussed and dental treatment considerations are proposed.

A new emerging issue that may have a direct impact on dental practice is the threat of terrorist attacks with biological agents. Drs. Shannon Mills, Salvador Flores, and Lee Shackelford cover this topic in their article on bioterrorism. The reader is being updated on known bioterror agents and the role of the dental provider in case of an attack. Hopefully the information in this article will remain a theoretical concern rather than become a realistic scenario.

Lastly, the legal aspects of infectious diseases, infected patients, and infected health care providers are important issues affecting all dental providers. Although HIV-infected health care providers have received most attention and have provided several legal case studies to learn from, the concern of transmission from infected workers and discrimination against infected providers applies equally to any infected health care provider. Helene Bednarsch and Bennett Klein specifically review the topic of infected health care providers in their article entitled "Legal Issues for Healthcare Workers with Bloodborne Infectious Disease."

After reading the topics in this issue, I hope that many of the questions facing oral health care providers in this era of emerging and re-emerging infectious diseases will be answered.

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