CONSENT FOR ORAL SURGERY IN PATIENTS WHO HAVE RECEIVED BISPHOSPHONATE DRUGS

The medical community is in the preliminary stages of finding out about a potential problem associated with taking bisphosphonate medications. Not all information we need is available at this point in time.

An increased incidence of osteonecrosis of the jaw has been associated with patients who have taken bisphosphonates. Osteonecrosis is a smoldering, long-term, destructive process in the jawbone that is often very difficult or impossible to eliminate. An increased risk has been associated with intraoral trauma, dental extractions, periodontal surgery, implant placement, and procedures that might cause even mild trauma to bone. It is speculated that bisphosphonates may affect the blood supply to the jawbones and reduce its ordinary excellent healing capacity.

Most reported cases of bisphosphonate-associated osteonecrosis have been in cancer patients treated with intravenous bisphosphonates, but some have occurred in patients with postmenopausal osteoporosis. Intravenous bisphosphonates include Zometa (zoledronic acid) and Aredia (pamidronate sodium).

Oral bisphosphonates include: Fosamax (alendronate), Actonel (risedronate), Skelid(tiludronate), and Didronel (etidronate). These pills are taken for osteoporosis by millions of patients in the United States and, there have been only a small number of reported cases of osteonecrosis in these patients.

If osteonecrosis should occur, treatment may be prolonged and difficult, involving ongoing intensive therapy including hospitalization, hyperbaric oxygen therapy, long-term antibiotics, surgery to remove dead bone, and reconstructive bone and facial surgery.

I certify that I understand this consent for surgery.

Patient's Signature (or legal guardian) Date

Printed Name of Patient

Doctor's Signature Date

Witness' Signature Date