



Sedation Methods

What is sedation?

Sedation is a technique to guide a child’s behavior during dental treatment. Medications are used to help increase cooperation and to reduce anxiety or discomfort associated with dental procedures. Sedative medications cause most children to become relaxed and drowsy. Unlike general anesthesia, sedation is not intended to make a patient unconscious or unresponsive.

Does my child need to be sedated for dental treatment?

Sedation is used for a child’s safety and comfort during dental procedures. It allows the child to cope better with dental treatment and helps prevent injury to the child from uncontrolled or undesirable movements. Sedation promotes a better environment for providing dental care. Sedation may be indicated for children who have a level of anxiety that prevents good coping skills, those who are very young and do not understand how to cope in a cooperative fashion, or those requiring extensive dental treatment. Sedation can also be helpful for some patients who have special needs.

Your pediatric dentist can help you choose the sedation option that is best for your child. For more information, please read below.

Nitrous Oxide

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Nitrous oxide/oxygen (N₂O-O₂) is a blend of two gases -- oxygen and nitrous oxide. A fitted mask is placed over the nose and, as the patient breathes normally, uptake occurs through the lungs. At the end of treatment, it is eliminated after a short period of breathing oxygen and has no lingering effects. Your child will smell a faint, sweet aroma and experience a sense of well-being and relaxation. Since it may produce a feeling of giddiness or euphoria, it is often called "laughing gas." Children sometimes report dreaming and their arms and legs may feel "tingly." It raises the pain threshold and may even make the time appear to pass quickly. If your child is worried by the sights, sounds or sensations of dental treatment, he or she may respond more positively with the use of nitrous oxide/oxygen.

Nitrous oxide/oxygen is perhaps the safest sedative in dentistry. It is well tolerated. It has a rapid onset, is reversible, can be adjusted in various concentrations and is non-allergenic. Your child remains fully conscious -- keeps all natural reflexes -- when breathing nitrous oxide/oxygen. He/she will be capable of responding to a question or request. Nitrous oxide/oxygen may also be used in combination with other sedative agents.



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Prior to your appointment: Give your child little or no food in the two hours preceding the dental visit (occasionally, nausea or vomiting occurs when a child has a full stomach). Second, tell your pediatric dentist about any respiratory condition that makes breathing through the nose difficult for your child, as it may limit the effectiveness of nitrous oxide/oxygen. Third, tell your pediatric dentist if your child is taking any medication on the day of the appointment.

Conscious Sedation

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Sedative medications cause most children to become relaxed and drowsy. Unlike general anesthesia, sedation is not intended to make a patient unconscious or unresponsive. Various medications can be used to sedate a child. Medicines will be selected based upon your child's overall health, level of anxiety and dental treatment recommendations.

Prior to the Appointment: Please notify us of any change in your child's health and/or medical condition. Do not bring your child for treatment with a fever, ear infection or cold. Should your child become ill, contact us to see if it is necessary to postpone the appointment. Tell the doctor of any medications that your child is currently taking and any drug reactions and/or change in medical history. Do not allow your child to eat or drink anything for six hours before the appointment. Nausea can be a side effect of the meds, so it is safest to have an empty stomach to not risk aspiration or a big mess.

After the appointment: Your pediatric dentist will evaluate your child's health status and discharge your child when he/she is responsive, stable and ready to go. Children recover from effects of sedatives at different rates so be prepared to remain at the office until the after-effects are minimal. Once home, your child must remain under adult supervision until fully recovered from the effects of the sedation. Your pediatric dentist will discuss specific post-sedation instructions with you, including appropriate diet and physical activity.



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Outpatient General Anesthesia

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General anesthesia is a controlled state of unconsciousness that eliminates awareness, movement and discomfort during dental treatment. A physician or dentist with specialized training can use various medications to provide general anesthesia for patients receiving dental care.

General anesthesia may be indicated for children with extensive dental needs who are extremely uncooperative, fearful or anxious or for the very young who do not understand how to cope in a cooperative fashion. General anesthesia also can be helpful for children requiring significant surgical procedures or patients having special health care needs.

Although there is some risk associated with general anesthesia, it can be used safely and effectively when administered by an appropriately-trained individual in an appropriately-equipped facility. Precautions are taken to protect your child during general anesthesia; personnel who are trained to manage complications will monitor your child closely. Your pediatric dentist will discuss the benefits and risks of general anesthesia and why it is recommended for your child.

A physical evaluation is required prior to general anesthesia for dental care. This physical assessment provides information to ensure the safety of your child during the general anesthesia procedure. Your pediatric dentist or general anesthesia provider will advise you about evaluation appointments that are required.

Parents are instructed to report to the pediatric dentist any illness that occurs prior to the general anesthesia appointment. It may be necessary to reschedule the appointment. It is very important to follow instructions regarding fasting from fluids and foods prior to the appointment.

Your child will be discharged when stable, alert, and ready to depart. Patients often are tired following general anesthesia. You will be instructed to let the child rest at home with minimal activity until the next day. Post-operative dietary recommendations also will be given.

Information about sedation taken from American Academy of Pediatric Dentistry, www.aapd.org.