

Mitigation of Aerosol Generating Procedures in Dentistry - A Rapid Review

Post-publication update - 25 January 2021

SDCEP published *Mitigation of Aerosol Generating Procedures in Dentistry – A Rapid Review* in September 2020. It was noted at the time of publication that this was a living document and that the Working Group would continue to assess emerging evidence to maintain its currency in the following months.

The Working Group met again on 13 January 2021. New members present included the Chair of the SAGE Environment and Modelling Group, who is an expert in healthcare ventilation, and additional representatives from the National Physical Laboratory.

The literature search used for the Rapid Review has been updated and the results screened for relevance to the review questions. Appraisal is ongoing but, to date, no new evidence has been identified that changes the conclusions of the Rapid Review. Further updating of the literature search will continue.

The Working Group considered the implications of the substantial increase in prevalence of COVID-19 infections in recent months, the emergence of more transmissible variants of SARS-CoV-2, no reports of transmission associated with dental care, the greater availability of testing and the vaccination programme that has recently commenced. The Working Group agreed that at present, despite these developments, the agreed positions and other conclusions within the Rapid Review remain unchanged.

The Working Group was keen to re-emphasise the importance of staff and patients continuing to adhere to the precautions specified in current national guidance, including:

- Reviewing all stages of the patient journey to assess adherence to procedures and any improvements required.
- Rigorous use of face coverings/masks and application of social distancing measures in clinical and nonclinical areas, including staff rooms.
- Use of the correct level of PPE.
- Individual patient risk assessment to determine the appropriate COVID-19 care pathway as described in the PHE Infection Prevention and Control (IPC) guidance.²
 - The IPC guidance describes High, Medium and Low risk care pathways. For a patient to be in the Low risk pathway, a negative PCR test is required, and the patient *must* have followed self-isolation advice. A lateral flow test is not sufficient unless the patient is part of a regular formal NHS testing plan and remains negative and asymptomatic.
 - While vaccination will provide protection for the vaccinated individual, this is not 100% and it is also unknown whether vaccination prevents onward transmission. Therefore, the same precautions are required for both vaccinated and unvaccinated patients and staff.
 - Screening questions should be consistent with current triage criteria, including quarantine requirements following international travel.³
 - Adequate ventilation in both clinical and non-clinical areas.

¹ The prevalence in the UK based on test data as of 13 January 2021 is estimated to be 485 cases per 100,000 of population, with early signs of a downward trend but with considerable regional variation. https://coronavirus.data.gov.uk/details/cases

² https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

³ For example, see <u>www.nipcm.hps.scot.nhs.uk/scottish-covid-19-infection-prevention-and-control-addendum-for-acute-settings/#a2702</u>