

To:
All General Dental Practitioners

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Web Site : www.hscboard.hscni.net

Dear Colleague

Management of Status Epilepticus in General Dental Practice

I write following an analysis by HSC Board of recent returns from practitioners to the Controlled Drugs Self-Assessment Questionnaire. It would appear there is a need for clarification on the management of prolonged epileptic seizures in general dental practice.

You will be aware that prolonged seizures are dangerous and may cause severe, long lasting cerebral damage to adults and children alike. In the event of a seizure occurring in the dental practice setting, the specific guidance in Appendix (vii) of 'Medical Emergencies and Resuscitation: Standards for clinical practice and training for dental practitioners and dental care professionals in general dental practice', published by the Resuscitation Council (updated in December 2012), should be followed. This guidance states:

If a patient continues to fit after an ambulance has been called then the emergency administration of buccal midazolam to assist in terminating the seizure is warranted. The dose is 10mg for adults and an appropriately reduced dose for children [information on children's doses on page 31 of guidance]. The evidence for using midazolam in this manner and for this indication is strong. It is recommended in the British National Formulary, by the Advanced Paediatric Life Support course, the National Epilepsy organisations and the Royal College of Paediatrics and Child Health.

The Board is aware that some practices currently keep **ampoules** of midazolam in their emergency drug kit for use in Status Epilepticus. These should now be safely destroyed and practices should instead keep the Buccolam® version of the drug (i.e. the non-injectable presentation that is absorbed across the oral mucosa). Buccolam® pre-filled syringes should be kept only in the emergency

drug box. Practitioners need to ensure that there are Standard Operating Procedures (SOPs) in place for this controlled drug so that the risk of inappropriate usage, particularly in practices where IV sedation is undertaken, is minimised.

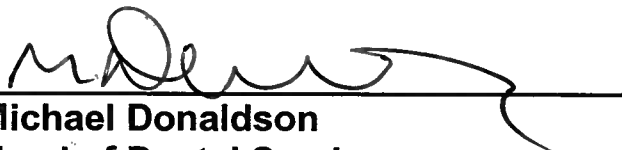
The full Resuscitation Council guidance document is available at: <http://www.resus.org.uk/pages/MEdental.htm> and dentists should be familiar with this document and ensure that this is brought to the attention of all members of the dental team and is incorporated into training for medical emergencies. The guidance in Appendix (ii) on Epileptic Seizures, pages 29 to 31, gives further information on patient management.

Action Summary

To allow dentists to appropriately manage Status Epilepticus, **Buccolam® pre-filled syringes** should be kept in emergency drug kits and practices should have accompanying SOPs. Other presentations of midazolam kept by practices in their emergency drugs kit should be disposed of.

If you require further information or clarification on any aspect of this letter please contact adrian.millen@hscni.net

Yours sincerely

A handwritten signature in black ink, appearing to read 'M. Donaldson', is written over a horizontal line.

Michael Donaldson
Head of Dental Services
HSCB