

## Article: Patients now request Oraqix

A new local anaesthetic out on the market is Oraqix, a gel used for scaling and root planing. It stands out due to its non-injectable application, with almost instant results from the point of application.



**oraqix**<sup>®</sup>

25/25mg per g periodontal gel  
(lidocaine, prilocaine)

In an attempt to utilise the product, (the obvious selling point being the simple way that the anaesthetic is applied) I called my next patient into the surgery. As soon as she came in she said “there is no way I can have any scaling done today as my gums are very sore”, later requesting if I could give her an injection. After the preliminary examination of the patient, I told her about Oraqix, which merely had to be placed in to the periodontal pockets. Its results being anesthetising the gingivae for up to twenty minutes.

Due to the relatively short time of the gel being available, I was dubious for obvious reasons about using Oraqix, as I would be with any other new product. I explained the procedure to the patient. I was unaware of just how effective Oraqix would be, so I informed the patient that if the treatment was in any way uncomfortable, that the quadrant scaling could instead be carried out over four visits using the traditional local anaesthetic, to which the patient agreed.

Starting at the lower left quadrant, I placed the gel in the gingival margins and into the pockets as advised. Anaesthesia is achieved almost instantly. I started hand scaling, regularly stopping to see if the patient was OK, her response being positive throughout, and so giving me confidence to continue with the ultrasonic scaler.

Having completed the treatment, we were both extremely happy with the result. Firstly, the patient not having suffered any discomfort, secondly, I was satisfied being able to carry out the treatment I needed to without any complaints from my patient. Her final words before she left the surgery were; “I will not dread a visit to the practice again for scaling”.

I have continued to use Oraqix with patients that require an anaesthetic for treatment with confidence and have had 100% success with all those on whom I have used the gel. Patients now actually request future procedures to be carried out using Oraqix.

Oraqix is advantageous to both patient and clinician: full mouth scaling and root planing can be carried out in one visit; a decrease in discomfort for the patient during such a procedure; and quickness in which the treatment can be carried out in one go.

On a personal level, I have been very impressed with Oraqix gel. The most appealing aspect about the product being the ease and simplicity of its use, combined with the duration of the anaesthetic.

**Baldesh Chana,  
Deputy Principal,  
Hygienist/Therapist Tutor  
Therapist of the Year 2006**

**ORAQIX 25/25 mg per g periodontal gel: Lidocaine, Prilocaine.**

**PRESENTATION:** Clear, colourless gel with 1g containing 25mg lidocaine and 25mg prilocaine. **USES:** Indicated in adults for localised anaesthesia in periodontal pockets for diagnostic and treatment procedures such as probing, scaling and/or root planing in adults. **DOSAGE AND ADMINISTRATION:** For adults one cartridge (1.7 g) or less is sufficient for one quadrant of dentition. Maximum recommended dose is five cartridges (8.5g gel). Oraqix has not been studied in paediatric patients. Apply with metric dental syringe or Oraqix™ Dispenser. Fill the periodontal pockets with Oraqix until the gel becomes visible at the gingival margin. Wait 30 sec before starting treatment. **CONTRAINDICATIONS, PRECAUTIONS, WARNINGS ETC:** **Contraindications:** Hypersensitivity to lidocaine, prilocaine, amide-type local anaesthetics or any excipients. Congenital or idiopathic methaemoglobinaemia, recurrent porphyria. **Precautions:** Oraqix must not be injected. Use with caution in patients with severe impairment of renal function, hepatic function, impulse initiation and conduction of the heart, patients in remission from porphyria or asymptomatic carriers of mutated genes responsible for porphyria. Patients with glucose-6-phosphate dehydrogenase deficiency are more susceptible to drug-induced methaemoglobinaemia. Do not apply to ulcerative lesions or during acute infections of oral cavity. **Side-effects:** Headache, local pain, soreness, numbness, ulcer, irritation, redness, reaction, taste perversion, dizziness, pulsation, vesicles, oedema, burning, nausea. Allergic reactions. Methaemoglobinaemia, consider giving slow i.v. injection of methyleneblue. **Pregnancy:** Avoid use in pregnancy. **Interactions:** With sulphonamides. Observe caution in combination with other local anaesthetics or agents structurally related to amide-type local anaesthetics. **PRECAUTIONS:** Do not freeze. **PACKAGE QUANTITIES:** Box of 20 cartridges and 20 dental applicators. **LEGAL CATEGORY:** POM. **PRODUCT LICENCE NUMBER:** 18344 **FOR FURTHER INFORMATION CONTACT THE PRODUCT LICENCE HOLDER:** DENTSPLY Ltd, Hamm Moor Lane, Addlestone, Weybridge, Surrey, KT15 2SE, England. **Date of preparation:** August 2006.

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