

suburban life



Dr. James Vito
discusses the
new "front line"
in the battle
against
COVID-19.

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Dr. Vito, shown here with staff members Kristine, Barbara, and Heather, wears full PPE during patient visits.

Dental professionals represent the new “front line” in the battle against a persistent virus with no known cure.

COVID-19

by JAMES A. VITO, D.M.D.
photography by JEFF ANDERSON

and Dentistry

Over the past three months, more than 200,000 dentists have had to suspend dental treatment due to shutdown orders. We were considered a nonessential business. Many dental procedures were interrupted and placed on hold for the past three months, placing many of our patients at risk for more dental disease and/or treatment.

I learned a lot about COVID-19 during this time. The virus affects people of all age groups, but predominately people age 65 and older. People in the at-risk group include those with comorbidities such as obesity, heart disease, lung disease, asthma, COPD, liver and kidney disease, immune deficiency or immune disorders, and diabetes. People who smoke or vape, or a combination of

the two, are three times more susceptible.

These are the people most at risk, if exposed. That is not to say that, if you are in an at-risk group and you catch COVID-19, you will pass away. You will have a more challenging time with it and may end up in the hospital, versus people who are not in the at-risk group when exposed to the virus. This group stays home for two

weeks and has an approximate 90 percent survival rate. Some do not know they were ever exposed to COVID-19.

COVID-19 is highly contagious. It is two times bigger than the influenza virus. Viruses mutate to survive, which is why finding a consistent and predictable vaccine is difficult. As viruses mutate, they get weaker. But the people who are in the at-risk categories are always going to have more problems than the healthier population, even with a weaker virus. The flu virus mutates four times faster than the COVID-19 virus. Because of this fact, once a vaccine is found for COVID-19 it will be a more stable vaccine for a longer period of time. In other words, the same

vaccine for COVID-19 could be used for two to three years before having to be modified, unlike the influenza A and B vaccines, which need to be modified every year.

As dentists, the mouth (oral cavity) is our domain. We are the “front line” when dealing with COVID-19. What makes it challenging as a dentist is that COVID-19, like other airborne coronaviruses such as H1N1, SARS, MERS, and, yes, even the common cold, spreads through the air via a sneeze, a cough, or a dental drill. AIDS, when it was first discovered in the United States in 1981, was also feared because we could aerosolize HIV—the virus that causes AIDS—with the drill. The airborne models for COVID-19 are similar to HIV models and how it would travel if it were aerosolized.

With HIV, we learned how to protect our patients and staff, and provide a healthy and safe work environment. We created and implemented sterilization and disinfection techniques to deal with all the current bacterial and viral contaminants. As such there have been no reported cases of dentists or dental staff contracting the HIV virus. The few cases reported over the years where some patients contracted HIV in the dental office were due to a lack of disinfection or sterilization procedures, or using dirty instruments to treat patients.

Many of the procedures we utilize today to disinfect and sterilize our offices will easily kill the COVID-19 virus as well as HIV, Hepatitis B and C, SARS, and MERS, to name a few. If you feel your dentist did a good job in terms of providing a safe, healthy, and clean environment for you before COVID-19, then what you will see now is that he or she has kicked it up a notch or two.

Many of us have reviewed the OSHA, CDC, and Pennsylvania Department of Health guidelines prior to reopening our dental practices. Many of us have made changes to our HVAC systems to improve and decontaminate the air within our offices as we are working on patients, as well as upped our game in terms of disinfecting the whole office several times a day as opposed to once or twice a day.

The New Normal

So, what will the “new normal” look like in the dental office? The parking lot will replace the warm and friendly waiting room. You will receive a cellphone call when you are ready to be seen. You will enter the office wearing a mask where you will receive a squirt of hand sanitizer and be asked a series of questions related to COVID-19 and have your temperature and pulse ox taken. Then you will be led to a treatment room by an assistant who is dressed as if he or

Air purifiers with HEPA filtration, which Dr. Vito uses throughout the office, may help to capture airborne particles the size of the COVID-19 virus.



she is escorting you to an operating room. Once seated, your temperature will be taken again and the COVID-19 questionnaire reviewed. You will then rinse with a mouth rinse, which will reduce the viral load in your mouth. The tooth or teeth that are to be worked on will be isolated to reduce aerosol spread, and the procedure will be performed and completed. You will then be asked to rinse again before leaving the treatment room, receive a squirt of hand sanitizer, and escorted to the front desk, where you will make any follow-up appointment and pay for your services from behind a clear partition by a patient coordinator wearing a facemask.

Once done you will be asked to leave by another door office so as to not cross paths with another patient. Meanwhile, staff members will disinfect and sanitize everything you could have possibly touched or breathed on in the course of your visit, including the restroom.

Many of these things most dentists have been doing already to maintain a high standard of infection control within their office. The big difference now is that disinfection measures will be more visible.

For the time being the most dramatic change for most offices will be the number of patients in an office at any given time. For now, we will be limited to one in and one out for each provider with no one waiting in a waiting room. For dentists who are used to seeing two or three patients at the same time or offices with multiple doctors, each used to seeing multiple patients at a time, this will be a big and challenging change.

We have been down this road before.



Measures such as a temperature gun, hand sanitizer, Lysol wipes, and a pulse oximeter help to protect Dr. Vito's patients and staff.

With every new virus, dentists are on the front lines. We are adaptive and understanding of what we need to do to protect our patients and our staff by providing a clean, safe, and healthy environment.

In the meantime, I hope everyone continues to follow the White House Coronavirus Task Force's guide to STOP THE SPREAD, which is to maintain social distancing, wear a mask when out, and wash your hands. As we continue the re-opening process, please do not become complacent. COVID-19 is still a viable virus for which currently there is no cure. We have come too far to let our collective guard down now. We are all in this together, and together we will all get through this. ■



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