

## THE ROLE OF THE DENTAL HYGIENIST IN A COMMUNITY HOSPITAL HEMOPHILIA PROGRAM.

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In order to improve the quality of dental care provided to the hemophilic patients at Long Island Jewish-Hillside Medical Center, a part time dental hygienist has recently joined the staff. In this new position, the hygienist is able to evaluate the dental needs of hemophilia team patients, monitor the ongoing care of these patients, and provide liaison between hospital based care and the services provided in the private sector. In addition, preventative care, including examination, radiographic survey, dental prophylaxis, placement of fissure sealants and dietary counseling are provided on a regular direct care basis. This addition to the Comprehensive Hemophilia Diagnostic and Treatment Center has clearly enhanced its ability to provide meaningful, personal dental health care.

LOCAL USE OF EPSILON-AMINOCAPROIC ACID IN DENTAL THERAPY. F.P. Berry, A.B. Coster and E.W. Berry. Auckland Hospital, Auckland, New Zealand.

Oral bleeding following trauma or dental extraction has been treated with local application of Epsilon-Aminocaproic Acid (E-ACA) in six patients including one with factor VIII antibodies. This treatment has produced rapid cessation of oozing with the formation of firm clots. Following the initial application E-ACA usage has been continued as a mouthwash. Clinically this appears to be a rapid and safe adjuvant therapy for oral bleeding.

HEMOSTASIS IN THE ORAL CAVITY. D. Tomić. Munich, West Germany

Various factors and reasons can be responsible for acute, severe or protracted hemorrhages in the oral cavity. Hemostasis with conventional methods frequently poses a difficult, dangerous and involved problem. A special method is developed utilizing the chemical and physical properties of inorganic and organic compounds, and this is found to be efficient for rapid and safe hemostasis. It acts on the blood coagulation process by lowering the pH value of blood, as well as by its astringent and osmotic properties. Altogether, the result is hemostasis and favorable wound healing. With the use of bone cement, the initial clot is physically protected, thus contributing more to reliable hemostasis, particularly after dental extraction. The method used, that is, bone cement in combination with the developed hemostatic agent, can be used without additional treatment for severe primary, as well as secondary hemorrhages. Patients suffering from hemophilia and other disorders of blood coagulation were treated successfully.