CONTEXT
Odontogenic pain is a common condition worldwide and the most prevalent form of orofacial pain. When dealing with odontogenic pain, dental care providers should base their clinical and pharmacological decisions following a methodical, ethical and objective evaluation, and not from personal clinical experiences or anecdotal knowledge. Therefore, a global consensus is necessary among health professionals to coalesce analgesic classic concepts and emerging trends to establish an effective strategy for treating odontogenic pain.

SCOPE
This policy statement covers general aspects for consideration during odontogenic pain diagnosis and treatment selection. It is addressed to National Dental Associations, dental academic groups and dental care providers, to improve proper management of this dental condition. No drug therapies are discussed or recommended, as drug availability and preferences vary throughout the world.

DEFINITIONS
Pain: Unpleasant, sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage\(^1\).
Odontogenic Pain: Pain originating from dental structures, pulpal or periodontal\(^2\).

PRINCIPLES
Pain is a common experience with profound social implications. Its economic burden extends to health services, loss of workdays, decreased productivity, difficulty on learning, and disability compensation. Treatment of odontogenic pain needs an adequate approach as the prevalence of this condition is still a significant health burden worldwide.

POLICY
FDI supports the following statements:

- Any clinical or pharmacological decision for pain management, should be supported by the patient’s complete medical information; including history of
• A differential diagnosis of dental pain is needed before any intervention; distinguishing between odontogenic pathologies and non-odontogenic painful etiologies. A detailed description of pain and the complete diagnostic sequence are mandatory, including adequate clinical and radiographic examination.

• Any treatment decision should include an adequate clinical approach (i.e. palliative, restorative, endodontic, etc.) and the selection of pharmacological adjuvants when needed. Such decisions should be made based on the best available evidence and under the patient’s consent.

• Pharmacological interventions are restricted by previous evidence of adverse or allergic reactions to certain drugs, and plausible drug interactions should be considered in the presence of concomitant pharmacological treatments.

• Appropriate anesthetic blockade is recommended in most cases before any clinical intervention for odontogenic pain management. The clinician is encouraged to personalize the selection of the anesthetic technique and solution, to assure the adequate depth and duration of treatment. Particularly in painful scenarios, alternative strategies should be considered to prevent and manage possible anesthetic failures that can lead to uncomfortable treatments.

• Post-operative analgesic protocols should be selected according to the severity and clinical presentation of pain. It is advisable to not only select analgesic compounds with the desirable clinical effect, but also with as few adverse reactions as possible. No pharmacological treatment shall be initiated without the confirmation of the initial diagnosis.

• If pain cannot be controlled by standard clinical and pharmacological protocols, the patient should be referred to proper specialized attention as soon as possible.

KEYWORDS
Pain, Diagnosis, Treatment

DISCLAIMER
The information in this Policy Statement was based on the best scientific evidence available at the time. It may be interpreted to reflect prevailing cultural sensitivities and socio-economic constraints.

REFERENCES