



**SOUTH AFRICAN PRIMARY HEALTHCARE LEVEL ESSENTIAL MEDICINES LIST
CHAPTER 1: DENTAL AND ORAL CONDITIONS
NEMLC RECOMMENDATIONS FOR MEDICINE AMENDMENTS (2016 -2018)**

Medicine amendment recommendations, with supporting evidence and rationale are listed below. Kindly review the medicine amendments in the context of the dental and oral conditions chapter.

SECTION	MEDICINE	ADDED/DELETED/NOT ADDED/AMENDED
1.1.1 Abscess, dental	Amoxicillin	Dose in children amended
1.1.2 Caries, dental	Lidocaine, injection	Directions for use amended to include prescribing by dental therapists
	Lidocaine with epinephrine (adrenaline), injection	

1.1.1 ABSCESS, DENTAL

Amoxicillin, oral: children dose amended

Amoxicillin dose amended as follows, for correctness:

Initiate treatment before referral:

Children

Amoxicillin, oral, 10–20 mg/kg 8 hourly for 5 days.

Weight kg	Dose mg	Use one of the following:				Age Months/years
		Susp		Capsule		
		125mg/5mL	250mg/5mL	250 mg	500 mg	
>11–25 kg	250 mg	10 mL	5 mL	1 cap	–	> 8 18 months–7 years
>25 kg	500 mg	–	–	2 caps	1 cap	>7 years

Level of Evidence: III Guidelines¹

1.1.2 CRIES, DENTAL

Lidocaine, injection: Directions for use amended to include prescribing by dental therapists

Lidocaine with epinephrine (adrenaline), injection: Directions for use amended to include prescribing by dental therapists

Recommendation: Lidocaine and lidocaine with epinephrine (adrenaline) be recommended for prescribing and administration by dental therapists in this clinical setting.

Rationale: Prescribing and use of local anaesthesia by dental therapists is provided for by the Health Professions Council of South Africa (HPCSA) Regulations - No 674 of September 2013

Level of evidence: III Legislation

Following review of external stakeholder comments, the following conditions were not recommended for inclusion to the dental chapter:

LUDWIG'S ANGINA AND PERICORONITIS

Guidance for the management of Ludwig's angina and pericoronitis not be included in the dental chapter.

¹ SAMF, 2016

Rationale: Syndromic management, rather than diagnostic management occurs at primary level of care and both conditions are relatively uncommon. Management of Ludwig's angina and pericoronitis is similar to that of abscess^{2 3}, which is already included in the dental chapter.

Level of Evidence: III Case series, Case Report, Expert opinion

CANCER, ORAL

Guidance for screening for oral cancer was not included in the STG.

Rationale: The PHC Expert Review Committee was of the opinion that this was not the mandate of the Committee as provided for by the National Drug Policy⁴.

Furthermore, the Non-Communicable Diseases Programme of the National Department of Health is in the process of releasing Guidelines for Cancer. However, the following referral criterion was added to Section 1.5: Aphthous ulcers, as an interim measure:

Referral

- » Major ulcers for further diagnostic evaluation.
- » Ulcers that are not healing within 10 days.

Level of Evidence: III Expert opinion

² Britt JC, Josephson GD, Gross CW. Ludwig's angina in the pediatric population: report of a case and review of the literature. Int J Pediatr Otorhinolaryngol. 2000 Jan 30;52(1):79-87.

³ Marioni G, Rinaldi R, Staffieri C, Marchese-Ragona R, Saia G, Stramare R, Bertolin A, Dal Borgo R, Ragno F, Staffieri A. Deep neck infection with dental origin: analysis of 85 consecutive cases (2000-2006). Acta Otolaryngol. 2008 Feb;128(2):201-6.

⁴ National Drug Policy, 1996.