

## Guidelines for the Management of Pregnant Patients in Dentistry

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### Abstract

During pregnancy body reactions to stress are reduced and the most of operator's therapeutic approaches on pregnant women may be dangerous. The purpose of this paper is to analyze the literature in order to outline guidelines for the management of pregnant patients in dentistry. In the first trimester nausea, vomiting and hypotension tendency are caused by endocrine alterations. In the third trimester, while the uterus goes enlarging itself, oxygen increased demand lowers diaphragmatic actions and can causes tachypnea and dyspnea. Hormonal increases induce oral mucosa modifications. Gingival reaction to local factors is modified and make it easier appearances of edema, of erythema and of bleeding, reaching of specific periodontal

diseases. Drugs administration and X-ray examinations can cause fetus malformations due to their teratogenic, mutagenic or toxic effects. Therefore, X-ray examinations should be restricted to emergencies. Expectant mothers need to be educated in proper dental behavior. They should do two-monthly checks in order to avoid from dental pathologies and from any kind of dangerous treatment.

**Keyword:** Dentistry; Pregnancy; Dental Treatment

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