DENTAL EXTRACTIONS IN CARDIAC PATIENTS - ELECTROCARDIOGRAPHIC CHANGES OCCURRING AFTER INJECTION OF A LOCAL ANAESTHETIC CONTAINING A VASOPRESSOR

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Cardiovascular disease is the most frequent cause of adult death in industrialized societies and is increasingly important in developing countries. The prevalence of coronary artery disease especially is in steep ascent and in the third world it now threatens to overtake malnutrition and infectious disease as the major cause of death.

Following the rise of living standards and improvement in medical and health care, patient survival after being diagnosed with cardiovascular disease has increased measurably and the average life span has become longer.

The high prevalence of cardiac disorders in the population, particularly ischaemic heart disease, means the dental surgeon will frequently encounter patients with these conditions.

Although patients can limit their exposure to physical stress, they still may experience psychological stress and be susceptible to its adverse sequelae. Dental treatment modalities can be associated with significant physiologic stress.

Hemodynamic and cardiac changes have been demonstrated after both stress induced release of endogenous catecholamines and the administration of local anaesthetic agents containing sympathomimetics.

So, dental procedures such as extractions can aggravate heart disease, can precipitate angina or possibly even provoke a heart attack.