Patient Natural Rubber Latex Allergy

AAE Fact Sheet

Background
Since the late 1980s, there has been a significant increase in the number of allergic reactions to natural rubber latex. The Food and Drug Administration attributes this rise to a ten-fold increase in the use of latex gloves. While only 1-6 percent of the general population is allergic to latex, the prevalence in healthcare workers and others whose occupations involve exposure to rubber products is around 10 percent. Children and adolescents with spina bifida also have an increased incidence because of their frequent exposure to latex products from birth. Natural rubber latex (NRL) is manufactured from the sap of the Hevea brasiliensis rubber tree. Some individuals are allergic to the proteins found in this natural rubber. During the production of commercial latex, several chemicals are added to the natural rubber. These chemicals also cause some individuals to have allergic reactions to latex products.

Latex Allergies and Dental Procedures
Patients with a history of latex allergy or a high risk for being allergic can be identified through their medical and dental history. Patients should verbally notify their dentists of their medical condition prior to their appointment, especially if there is potential for an allergic reaction to latex.

Relationship Between Latex Allergy and Endodontic (Root Canal) Procedures
Endodontists use gloves and rubber dams to ensure safe and successful endodontic treatment. These products often contain latex. Precautions can and must be taken to safely treat patients with latex allergies. Special gloves and rubber dams from which the manufacturer has removed allergy-causing chemicals can be substituted. If, however, the patient has an immediate type of allergy to natural latex proteins, the endodontist must use vinyl or nitrile rubber gloves and dams instead.

In patients with a true immediate hypersensitivity to natural rubber latex, the endodontist should consult with the patient’s allergist prior to treatment. The physician, patient, and endodontist should all be involved in any decisions made concerning the dental materials and techniques used in performing the endodontic treatment. With proper precautions, a patient with a history of latex allergy can safely receive endodontic treatment and save a tooth which might otherwise be lost.

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The guidance in this statement is not intended to substitute for a clinician’s independent judgement in light of the conditions and needs of a specific patient.

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