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AAE members may reprint this position statement for distribution to patients or referring dentists.

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Endodontic Implications of Medication-Related Osteonecrosis of the Jaw

AAE Guideline

In 2010, the AAE published a position statement on Endodontic Implications of Bisphosphonate-Associated Osteonecrosis of the Jaws, concluding that “it would appear prudent to consider all patients taking bisphosphonates to be at some risk of ONJ.” The AAE reaffirms this and provides the following updated information:

In 2014, the American Association of Oral and Maxillofacial Surgeons published a position paper, [Medication-Related Osteonecrosis of the Jaw—2014 Update](#). The title change reflects that ONJ also is associated with other antiresorptive and antiangiogenic drugs. The paper includes a comprehensive literature review and revisions to the AAOMS guidelines to reflect current knowledge.

In terms of the risk of ONJ from endodontic procedures, the report states that “absent data, the committee considers the risk for ONJ after dental implant placement and endodontic or periodontic procedures that require exposure and manipulation of the bone as comparable to the risk associated with tooth extraction.”

In addition to reaffirming that it is prudent to consider all patients taking bisphosphonates to be at some risk of ONJ, the AAE recommends that endodontists become familiar with the AAOMS diagnosis, prevention and management strategies for patients who have taken antiresorptive or antiangiogenic medications.

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