Parental Preferences of Opioid Use During Enteral Moderate Sedation; A **Prospective Study**

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INTRODUCTION

- Opioid epidemic has committed destructive actions across the U.S. since the early 1990's and recently became a public health concern
- Opioids are commonly used for pain management but can also be beneficial to increase the effectiveness of procedural sedation in pediatric dentistry
- Up to 20% of children in the dental office require sedation to complete routine operative dental work
- Enteral sedation can help to minimize physical discomfort and pain, control anxiety, minimize psychological trauma, and maximize the potential for amnesia
- Common drug classes administered: nitrous oxide, benzodiazepines, antihistamines, and opioids
- With the rising concerns and stigma surrounding opioid use, we hoped to determine guardian preferences toward the use of opioids in enteral moderate sedation

PURPOSE

 To understand if guardians of pediatric dental patients scheduled for enteral moderate sedation prefer an opioid or non-opioid sedation regimen

METHOD

- Prospective survey completed at El Rio Community Health Center Dental Clinics in Tucson, AZ from July to December 2022
- Guardians of ASA I or II patients aged 3-14 years old scheduled for enteral moderate sedation consultation appointment were invited to complete the survey
- Information regarding risks and benefits of opioid use were provided alongside the survey
- Survey questions included if the guardian had a preference whether their child received a drug regimen with or without an opioid, patient age, patient gender, previous sedation experience, and guardian education level were collected as part of the survey

FIGURE

		Overall (n (%))
n		71
Age	3-5 Years	22 (31.0)
	6-8 Years	44 (62.0)
	9-11 Years	5 (7.0)
Gender	Male	29 (40.8)
	Female	42 (59.2)
Previous Sedation Experience	No Response	1 (1.4)
	Yes	33 (46.5)
	No	37 (52.1)
Drug Regimen	No Response	1 (1.4)
	With Opioid	7 (9.9)
	Without Opiod	29 (40.8)
	No preference	34 (47.9)
Guardian Education Level	No Response	1 (1.4)
	Less Than High	
	School	4 (5.6)
	High School	41 (57.7)
	Associates	
	Degree	14 (19.7)
	Bachelors	
	Degree	7 (9.9)
	Graduate Degree	4 (5.6)

RESULTS

- 71 surveys collected
- No statistical significance comparing patient age versus sedation drug regimen preference (p=0.572)
- regimen preference (p=0.63)
- sedation drug regimen preference (p=0.808)
- No statistical significance comparing guardian education level versus sedation drug regimen preference (p=0.398)

CONCLUSIONS

1. There was no correlation to patient age, gender, previous sedation drug regimen preference (opioid or non-opioid).

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No statistical significance comparing patient gender versus sedation drug

• No statistical significance comparing previous sedation experience versus

experience, or guardian education level and enteral moderate sedation

2. Further research should be conducted to confirm or deny these results.

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