

Questions to District Health Units (Ontario)

Preamble

In recent months District Health Units throughout Ontario have been conducting uninvited inspections of Dental Practices based on alleged violations of decontamination procedures for dental instruments. These actions have resulted in the closure of practices and the request that their patients be tested for HIV, HBV and HCV. These outcomes are justified only if there is a credible linkage between contaminated dental instruments and the transmission of these viral infections. Accordingly, it is reasonable to ask a series of questions to establish the relationship between dental instruments and disease transmission.

Questions

1. The Provincial Infectious Disease Advisory Committee on Infection Prevention and Control was to consider all health care facilities. Why had it no dental representation?
2. According to an article in the 2001 edition of the Canadian Journal of Infectious Diseases, May-June; 12(3):131-132, "Infection control interventions have yet to be validated in health care settings outside acute care." What evidence exists to refute this statement and to justify that acute care decontamination procedures are necessary and cost effective in out-patient dental facilities?
3. What clinically derived evidence exists demonstrating that dental instruments have transmitted infections?
4. If such evidence does exist what were the involved instruments, what clinical procedures were performed and what were the health histories of the patients and attending dental staff?
5. If no such evidence exists what is the justification for subjecting dental instruments to excessive decontamination and wrapping procedures when they are used in a non-sterile environment?
6. What epidemiology studies exist showing that HIV, HBV and HCV are spread by dental instruments?
7. If there are no such studies why are dental patients being tested for these infections?
8. Considering that HIV, HBV and HCV are enveloped viruses that are deactivated by low level disinfectants, what proof exists that they would survive physical cleaning, immersion in low level disinfectants and the harsh environment of a steam sterilizer?
9. If no such evidence exists why test patients for these pathogens?
10. Considering that HIV, HBV and HCV are principally spread through high risk activities why would such routes of transmission not be thoroughly investigated prior to assuming that dental instruments are the cause?
11. Since District Health Unit investigations are initiated not because of evidence of an infection but because of a complaint regarding possible decontamination infractions, what cost/benefit analyses have been performed to justify that district health investigations are creating a safer environment for dental patients?