



Opinion Piece Article

Impact of COVID-19 on dentistry in Sri Lanka: An overview

Revathy Arunthavarajah¹, Nivethika Thevarasah², Anoj Ramanan¹, Niroshan Shivam¹

¹Department of Preventive Dentistry, Sri Balaji Dental College, ²Department of Oral Medicine and Radiology, Thai Moogambigai Dental College and Hospital, Chennai, Tamil Nadu, India.



***Corresponding author**

Revathy Arunthavarajah,
Department of Preventive
Dentistry, Sri Balaji Dental
College, Chennai, Tamil Nadu,
India.

reka.rey4@gmail.com

Received : 26 June 2020

Accepted : 11 July 2020

Published : 19 November 2020

DOI

10.25259/JGOH_32_2020

Quick Response Code:



COVID-19 is an infectious disease caused by the most recently discovered SARS-CoV2 virus. This new virus and disease were unknown to the world before the outbreak began in Wuhan, China, in December 2019. COVID-19 is much more than a health crisis and based on recent reports can cause havoc by recurring in waves. The COVID-19 has caused devastating social, economic, and political crisis throughout the globe that is expected to have long-lasting scars. Sri Lanka, officially the democratic socialist republic, is an island country in South Asia located in the Indian ocean. The COVID-19 pandemic has not spared the small island nation and as of June 15, 2020, 1905 confirmed cases have been reported in the country with 11 deaths.^[1] The prevalence of COVID-19 in Sri Lanka is low when compared with neighboring countries such as India, Pakistan, or China where the virus outbreak began. As in the course of any disease outbreak, the health-care professionals have been immediately involved in the national emergency workforce contributing their services day and night. Among all the health care workers, dentists are workers most exposed to the risk of being affected by COVID-19, much more than nurses and general physicians. The fundamental concept of SARS-CoV2 virus transmission is mainly through inhalation, ingestion, or direct contact with saliva droplets through fomites, because the viral load contained in the human saliva is very high. The most recommended guidelines indicate that dentist should avoid scheduling of patients for elective procedures and only emergency dental situations be considered during the COVID-19 outbreak.

SARS-CoV2 virus is highly contagious and is rapidly evolving. The disease intensity varies from country to country and even between continents. The main route of spread is through droplets; however, one troubling revelation is that the virus remains active on non-living surfaces for quite some time depending on the nature of the surface, this makes the dental team highly susceptible as the direction of aerosol generation or splatter cannot be controlled during procedure.^[2] In addition, the asymptomatic incubation period for individuals infected with COVID-19 has been reported to be 1–14 days and even 24 days in some individuals cases are reported. A plethora of guidelines has been issued by provincial and international health regulatory authorities toward dental practice during COVID-19 pandemic. However, the operational cost and maintenance of a safe environment for the dental team and subsequent appointments have increased significantly. However, the charges for routine practice have not and this could threaten the financial stability of an independent practitioner in the long run, if the pandemic persists for a longer time. Loss of practice due to fear for oneself and transmitting the infections to the family looms larger than anticipated among dentists, loss of revenue, and financial independence are greatly threatened. We can only hope the situation gets better, vaccine for this disease is found

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soon and the dentistry gets back to normal in this small island nation in Southeast Asia.

Declaration of patient consent

Patient's consent not required as there are no patients in this study.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

REFERENCES

1. Gamio L. The Workers Who Face the Greatest Coronavirus Risk; 2020. Available from: <https://www.nytimes.com/interactive/2020/03/15/business/economy/coronavirus-worker-risk.html?action=click&module=top+stories&pgtype=homepage>. [Last accessed on 2020 Mar 15].
2. van Doremalen N, Bushmaker T, Morris D, Holbrook M, Gamble A, Williamson B, *et al.* Aerosol and surface stability of SARS-CoV-2 as compared with SARS-CoV-1. *N Engl J Med* 2020;382:1564-7.

How to cite this article: Arunthavarajah R, Thevarasah N, Ramanan A, Shivam N. Impact of COVID-19 on dentistry in Sri Lanka: An overview. *J Global Oral Health* 2020;3(2):128-9.