

RUTGERS Cancer Institute of New Jersey RUTGERS HEALTH



Osteonecrosis of the Jaw

What is Osteonecrosis of the Jaw?

Osteonecrosis of the jaw is a rare condition that involves the loss or breakdown of bone.

What are the Main Causes of Osteonecrosis of the Jaw?

The exact cause of osteonecrosis of the jaw is not known.

Some bone-targeting medicines that may cause it are:

- Bisphosphonates or Rankl inhibitors (denosumab)
- Zolendronic acid (Zometa[®]) or denosumab (Prolia[®] or Xgeva[®]) by injection
- Bisphosphonates in a pill form such as alendronate (Fosamax[®]) or ibandronate sodium (Boniva[®])

Other factors that may increase the risk of osteonecrosis of the jaw include:

- Radiation to the head or neck area
- Long term or high dose steroid use (such as dexamethasone)
- Treatment with chemotherapy
- Blood-related disorders (such as sickle cell or HIV)
- History of Lupus
- Poor dental health and hygiene
- Gum disease or recent dental surgery (such as pulled teeth or implants)
- Alcohol abuse or cigarette smoking

What Are Signs and Symptoms of Osteonecrosis of the Jaw?

If you have any of these symptoms, tell your oncology healthcare team immediately. You may need to see an oral surgeon or dental oncologist with experience in osteonecrosis.

- Pain, swelling or change in color of the gums or jaw
- Poor healing of gums after dental work
- Loosening of teeth
- Numbness or feeling of heaviness in the jaw
- Bone visible in your mouth

Dental Health and Hygiene Practices

- Discuss your dental history with your healthcare team.
- Schedule a dental check-up and cleaning before cancer treatment begins and periodically during the course of your treatment.
- Always check with your oncology healthcare team prior to dental cleanings or procedures. If your blood counts are low, you may be told to avoid seeing the dentist during this timeframe. Your oncology healthcare team will work with you to help determine the best time to schedule a dental visit.

- Tell your dentist you are getting treatment for cancer, especially if taking bisphosphonates or Rankl inhibitors. The risk of Osteonecrosis increases if you have dental surgery while on these medicines.
- Have your dentist check and adjust removable dentures periodically during your cancer treatment.
- Use a mirror to check your teeth and gums daily for any changes such as sores, bleeding or changes in color.
- Brush your teeth with a soft toothbrush after every meal and at bedtime.
- Talk to your health care team about flossing. If you can floss, floss once a day, avoiding areas of your gums that are bleeding or sore.
- Keep your mouth moist by rinsing your mouth often with water and avoid commercial mouthwashes that contain alcohol.
- Avoid foods and drinks that can irritate your mouth such as spicy or crunchy foods and alcoholic drinks.
- Avoid tobacco products. Please talk to your healthcare team about tobacco cessation.

Treatment

- Rarely requires surgery. Surgery can increase the risk for slow healing.
- Conservative treatment includes:
 - o Rinses
 - Antibiotics
 - Oral pain reliever

If you are in need of immediate assistance, please call 732-235-2465 and select the option that best meets your needs.