STOHN BONJ PROCESS DEVELOPMENT

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network formation

- May 2008: Clinical Translational Science Award (CTSA)
- ♦ Included Funds for PBRN
- Dr. Michael Parchman & Holly Hayes co-direct PBRN resource center
- STARNet and RRNet
 25 years combined experience at PBRN
 Serve as models for UTHSC PBRN



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Wonder Drug?





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Side effects Osteoclast function severely impaired Capillary network in bone not maintained Bone becomes too dense choking capillary network

Incidence of BONJ in Maxilla and Mandible

19th most prescribed drug group worldwide Synthetic analogues of pyrophosphates Not metabolized ½ absorbed dose is distributed to bone

Increase bone density and thickness

thickness
Prevent tumors from removing bone and spreading
Inhibit differentiation of bone marrow cells into osteoclasts
Inhibit Osteoclast activity
Reduction in bone turnover and resorption
Reduce local release of factors that stimulate tumor growth

- Mostly associated with intravenous (IV)bisphosphonates
 Zometa (Zoledronic Acid)
 Aredia (Palmidronate)
- Mostly following dental extractions or periodontal surgery

- Trauma



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What's Been Studied Only reported cases Worst cases in IV....... How many are related to "Oral" doses What's risk for "Oral" doses What's risk for "Oral" doses Time dependant? Drug dependant? Treatment



STOHN BONJ Study

- "Oral" route most commonly seen in our practices.
- What are practitioners doing when an accurate additional and a second secon
- encount
 - Basic Treatme
- Keferral??
- Baseline education level
 - Is literature doing it's job?
 - Altered treatment plans?



BONJ Study development

- Formulated the question.
- Gathered current literature
- Formulated Hypothesis
- Developed study plan and parameters Developed survey
 Decided who to survey
- Gained IRB approval
- Survey
- Data Collection and Statistics





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