Tegaderm™ for prevention of intraoperative tooth aspiration

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To the Editor:

Dental trauma during anesthesia may increase the risk of aspiration, particularly when the potential for complications is increased due to cusp or incisor edge fractures in the presence of root fragments or in patients with severe tooth mobility [1].

A 40-year-old male scheduled for surgery under general anesthesia was observed to have a fractured right lateral maxillary incisor as a result of a fall the previous night [Electronic Supplementary Material (ESM) Fig. 1A]. The main concern of the anesthesiologist was the possibility of the fractured segment breaking off into the oral cavity with risk of pulmonary aspiration. We therefore used Tegaderm™ (3 M Deutschland GmbH, Neuss, Germany), a transparent film dressing, to prevent the tooth from

chipping off and falling into the oral cavity. Tegaderm™ was cut to size and applied onto the fractured tooth, encasing it completely; the other edge of the Tegaderm™ was anchored to the upper lip [ESM Fig. 1B]. We ensured that the application surface was clean and dry. In the case of trauma to the tooth, the fractured segment would remain encased in the Tegaderm™, which in turn was firmly attached to the upper lip, thus preventing any part of the tooth from getting lost in the oral cavity. The intraoperative course was uneventful, and the Tegaderm™ was removed at the end of the procedure with the fractured tooth still intact.

We have previously reported a technique of tying a suture around a loose tooth for retrieval in case of avulsion and thus preventing aspiration of the tooth [2]. Although useful for loose teeth, the technique was not feasible for our patient with a fractured tooth. Tegaderm™ is quick and easy to apply, it does not hamper laryngoscopy and it may be used to protect the patient from the hazard of pulmonary aspiration of teeth.

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Compliance with ethical standards

Conflict of interest The authors report that there were no conflicts of interest.

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