

the roots of third molar. The results of this simple study is presented.

Conclusion: Paresthesia/anaesthesia of the area supplied by the IDN is quite debilitating. It is therefore paramount that the risk is accurately predicted. The authors feel that negative imaging is superior in predicting this risk.

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41

A 7-year retrospective analysis of the outcome of hyperbaric oxygen therapy in osteoradionecrosis patients treated at the London Hyperbaric Medicine Unit

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Introduction: Hyperbaric oxygen therapy (HBOT) is part of the armamentarium in the management of radiation-induced pathologies. The most recognised protocol for the use of HBOT in the treatment of osteoradionecrosis (ORN) was published by Marx.

Aim: The aim of this study was to test the validity of Marx's conclusions in a large patient cohort.

Method: This paper reports a 7-year retrospective analysis of all patients treated in the London Hyperbaric Medicine Unit based at Whipps Cross University Hospital during this period. 104 Patients with head and neck pathologies were identified of whom 48 were exclusively treated for ORN.

Results: Records revealed that 35/48 (72.9%) patients completed the planned number of dives. Notwithstanding this, 38/48 (79.2%) of patients had a documented improvement in symptoms or quality of life following HBOT. Completion of HBOT was strongly associated with an improvement in symptoms ($p < 0.001$, Chi-squared test).

Conclusions: This is one of the largest published series in the UK and the findings support the use of HBOT for the symptomatic treatment of ORN. However, despite initial intentions, Marx's specified protocol was rarely fulfilled. Consequently, the validity of Marx's results could not be quantified using this data. The need for further, well-designed studies into the efficacy of HBOT in ORN remains.

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42

The effect of reported penicillin allergy on the in-hospital treatment of dentally related facial cellulitis

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Introduction: Oral and Maxillofacial Departments are seeing increasing numbers of patients with dentally related facial

cellulitis (DFC). Treatment is commonly with a penicillin-based antibiotic, however 10% of the population have a self-reported penicillin allergy and receive alternative treatment as a result.

Aim: To investigate the differences in outcomes of treatment for DFC between those reporting to have penicillin allergy and those without.

Method: Patients with a diagnosis of DFC over a five-year period were retrospectively identified from the hospital admissions database. The medical notes were scrutinised and proforma completed. Results were tabulated and analysed using SPSS V15.

Results: Total number of patients admitted in the five-year period was 71, average age 35.6 years (34 males, 37 females). Eleven patients reported having PA (10 females). Non-allergic patients were treated with co-amoxiclav and metronidazole. Those reporting penicillin allergy were given cefuroxime and metronidazole. Difference in length of hospital admission between the groups was significant ($p < 0.05$ Mann–Whitney *U*-test).

Outcomes are shown below.

	No allergy (<i>N</i> = 60)	Penicillin allergy (<i>N</i> = 11)
Length of hospital admission	37.5 h	24.9 h
GA extractions	9 (15%)	1 (9%)
LA extractions	12 (20%)	1 (9%)
Incision and drainage	14 (23%)	1 (9%)

Conclusion: Patients with reported penicillin allergy had a significantly shorter hospital stay. 27% with a penicillin allergy had a surgical procedure compared to 58% with no allergy. Cefuroxime and metronidazole in combination may improve outcome. However, many factors affect length of hospital admission including type of surgical intervention, availability of discharge medicines and paperwork, and social factors.

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43

Infective endocarditis and antibiotic prophylaxis—what do our Cardiac colleagues think? A national survey

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Introduction: The National Institute of Clinical Excellence (NICE) guidelines introduced in 2008 have significantly altered the practice of performing exodontia on patients