



LS Dental

Ipoh · Dr. Kent Teoh

PATIENT GUIDE

Bone medicines & your jaw

Medicines that strengthen bone can change how the jaw heals. The risk is small — and one conversation keeps it that way.

● Osteoporosis pills

● Bone injections

● Before extractions

How these medicines **work**

Bone-strengthening medicines slow the normal **renewal** of bone — helpful for fragile bones, but the **jaw relies on that renewal to heal** after a tooth is removed. Rarely, healing stalls and a patch of bone stays exposed. This is called **MRONJ**.

● The medicines this covers

- Bisphosphonates (e.g. alendronate) for osteoporosis
- Higher, cancer-strength doses (often into a vein)
- Denosumab injections
- Some other bone or anti-cancer treatments

Keep it in proportion

For the common osteoporosis tablets, MRONJ is **rare**. These medicines protect you from serious fractures — the goal isn't to fear them, but to **plan dental care wisely** around them.

Not everyone is at the same risk

Risk depends mostly on **which medicine, how it's given, and for how long** — plus your general health. Knowing where you sit helps your dentist plan.

● Lower risk

- **Tablets for osteoporosis**, taken for a shorter time
- Otherwise healthy, good oral hygiene
- Most routine dental care is straightforward

Higher risk

- **Injected / cancer-strength** doses
- Taken for **several years**
- Steroids, diabetes, smoking, or gum disease
- Extractions and jaw surgery raise it most

The key trigger: most cases follow a **tooth extraction or an injury** to the gum and bone — which is exactly where planning helps.

Signs to know & how to prevent it

The best time to act is **before** you start the medicine. Getting the mouth healthy first removes most of the risk.

● Prevent it

- **Tell your doctor and dentist** before starting
- Have a check-up and get the mouth healthy first
- Do any needed extractions **before** the medicine, if possible
- Excellent daily cleaning; regular check-ups after

Signs of a problem

- A socket or gum that **won't heal** after weeks
- Exposed bone you can see or feel
- Pain, swelling, numbness or loose teeth
- Report these early — don't wait

Good news: caught early, MRONJ is usually managed with gentle care, rinses and close follow-up — not major surgery.

Don't avoid the dentist — **plan with them**

The riskiest choice is to **stay away out of worry** and let a problem grow. Almost all dental care is safe — it just needs planning.

● Simple rules

- 1. Always tell your dentist you take (or took) a bone medicine — and the name
- 2. Keep the mouth healthy so extractions are rarely needed
- 3. If a tooth must come out, your dentist plans it carefully with your doctor
- 4. Never stop the medicine on your own to have dental work



Bring your list: the medicine name, dose, and how long you've taken it lets us plan safely.

On a bone medicine and need dental care?

Tell us before we start — we'll plan around it safely and coordinate with your doctor.



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