

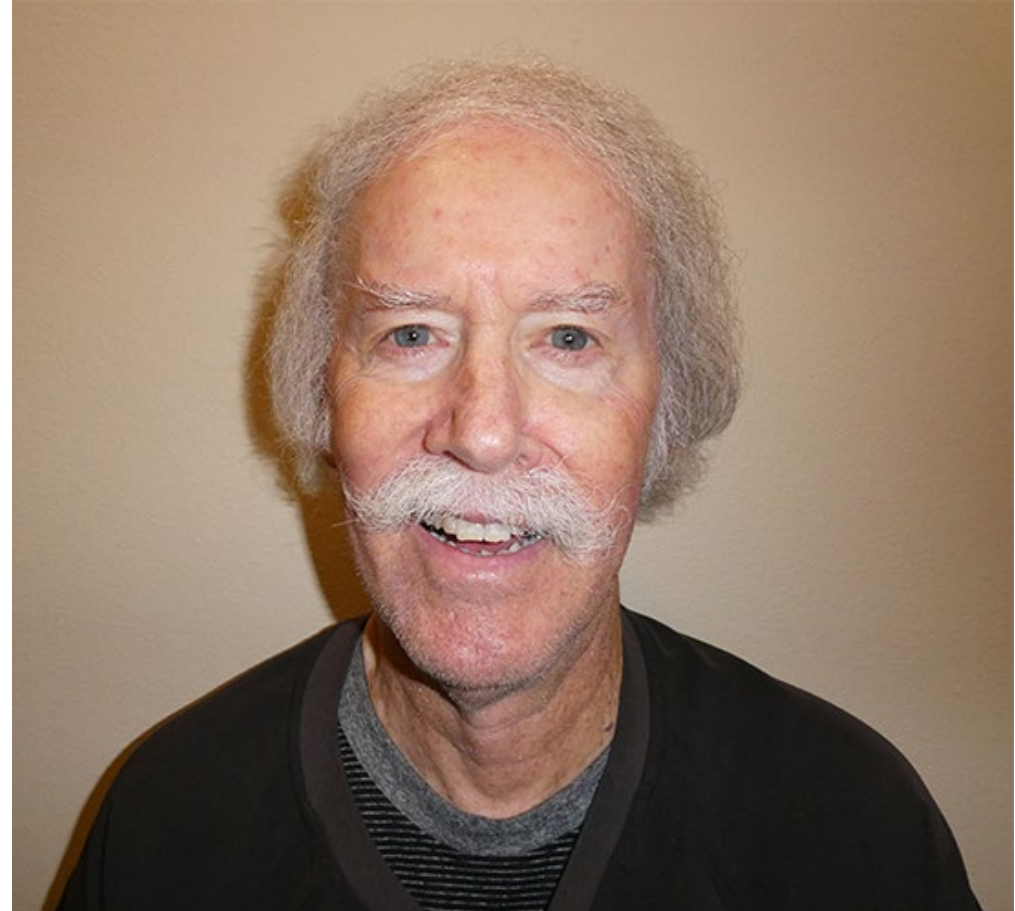


Silver Diamine Fluoride - Potential Use in Rural Areas and Primary Care Settings

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Speaker:

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Speaker Disclosure

In the past 24 months, I have not had any financial relationships with any ineligible companies.

Disclaimer

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Objectives

- Learn why 38% SDF is so effective in stopping caries progression
- Learn the indications for using 38% SDF
- Learn the 38% SDF clinical protocol

38% Silver Diamine Fluoride

- Topically applied treatment that controls active dental caries and aids in preventing further progression of the disease
- Dual mechanism of action
- Silver component acts as an anti-microbial agent killing bacteria and preventing the formation of new biofilm
- Fluoride acts to prevent further demineralization of tooth structure

38% Silver Diamine Fluoride







38% Silver Diamine Fluoride

Scientific Evidence

FDA 510 (K)

APPROVED





38% Silver Diamine Fluoride

- First used in Japan 80 years ago
- Has been used as an effective measure of arresting active caries in Japan, China and other Asian countries, Australia and South America since the 1960's

5 Attributes of 38% SDF

- **Arrests caries**
- **Ease and simplicity of use (paint on)**
- **Affordability of material (approximately \$0.70 per application)**
- **Minimal requirement for personnel time and training (one minute application twice a year)**
- **Non-invasive**

38% SDF Indicated For:

- Patients with extreme caries risk (xerostomia, ECC)
- Those who cannot tolerate conventional care
- Patients who must be stabilized so they can be restored over time
- Patients who are medically compromised or too frail to be treated conventionally
- Those in disparity populations with little access to care

38% SDF Protocol

- 1 drop SDF in plastic dappen dish
- Remove bulk saliva with saliva ejector
- Isolate tongue and cheek from affected teeth with 2x2 gauze or cotton rolls
- If near the gingiva, apply petroleum jelly with Q-tip (SDF will stain gingiva)
- Wipe caries with gauze or dry brush caries to remove plaque

38% SDF Protocol

- Dry affected tooth surface with air syringe or, if not feasible, dry with cotton
- Bend microbrush, immerse in SDF, remove excess on side of dappen dish
- Apply SDF directly onto affected tooth surface, rub in
- Allow SDF to absorb for 1 minute if reasonable, then remove excess with gauze or cotton roll
- Rinse with water

38% SDF

- If successful, caries will turn black
- Caregivers need to be told this is a good thing as it means the treatment was successful
- Apply every 6 months for maximum results

CDT Code for SDF

- New code in 2016
- D1354 –interim caries arresting medicament application

Dr. Jeanette MacLean

- Pediatric dentist in Glendale, AZ
- Has many clinical videos on use of SDF and SMART restorations
- How to treat interproximal caries with SDF
- Cover black stain with glass ionomer

38% SDF



- Caries should be black









- In order for more people to receive the benefits of 38% SDF, we must expand the number of providers
- Presently in LA the Board of Dentistry allows dentists and dental hygienists to apply SDF
- The board needs to consider allowing EFDA's to also apply 38% SDF

- Medical staff have more flexibility
- MD's
- PA's
- NP's
- MA's
- Can all apply SDF after training
- What SDF training is available to medical providers?

FQCHC's

- How about training WIC staff to do oral screenings and apply SDF?

Questions?

