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Patient and Clinician Awareness of MRONJ in Intravenous Anti-Resorptive Therapy.

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**Objectives** Intravenous antiresorptive therapy is a commonly used treatment modality in the management of breast cancer and metastatic bone disease. Medication-related Osteonecrosis of the Jaws (MRONJ) is a potentially debilitating oral health-related complication of this therapy. This study aimed to evaluate patient and clinician understanding of oral health requirements for those undergoing this therapy. Subsequently, an information leaflet outlining these risks, specifically MRONJ, was formulated for dissemination.

**Methods** This cross-sectional study comprised two questionnaires targeting patients and clinicians respectively, adapted from pre-existing questionnaires. Following face validity, all patients with breast cancer or metastatic bone disease due to commence treatment with intravenous bisphosphonates or denosumab in Cork University Hospital in Ireland were eligible, in addition to clinical staff involved in their care. Data collection was undertaken over a predetermined four-month period. The information leaflet was then drafted, modelled on pre-existing ones used in other institutions.

**Results** A total of 105 patient responses were recorded. The majority (n=91) were breast cancer patients with 38.1% (n=65) reporting metastases, most frequently (n=25) to bone. 41.9% (n=44) of patients were aware of MRONJ, with the information primarily communicated via the oncology team (43.18%). 98% (n=103) supported development of an information leaflet. Chi-square tests assessed the correlation of MRONJ awareness and demographic factors, with a statistically significant association demonstrated with a higher level of education (p=0.017, 95% CI). 11 responses were recorded among clinicians therefore descriptive analysis alone was performed. All clinicians reported awareness of MRONJ but none currently use an information leaflet to communicate this risk

**Conclusions** This study highlighted deficiencies in both communication and awareness of MRONJ. Among patients, support for an information leaflet was clearly demonstrated. Furthermore, a majority of clinicians (n=6) were unaware of guidelines surrounding MRONJ, suggesting support for further education. Following formulation and implementation of the information leaflet outlining these risks, a future follow-up study ascertaining its effectiveness may prove beneficial.