

# ORTHODONTIC INFORMED CONSENT

## During Bisphosphonate Treatment

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*for the Orthodontic Patient*

### **Risks and Limitations of Orthodontic Treatment**

The purpose of this document is to inform you of the general risks associated with orthodontic treatment of patients who are now taking, or have taken in the past, medications known as “bisphosphonates.” Bisphosphonates are medications prescribed by your physician for the treatment of a variety of difficult medical disorders. Bisphosphonate medication types that you may be taking, or have taken, can be: **Fosamax** (alendronate), **Actonel** (risedronate), **Boniva** (ibandronate), **Skelid** (tiludronate), **Didronel** (etidronate), **Aredia** (pamidronate), or **Zometa** (zoledronic acid). There may be some additional brand names in addition to the above, but they are all known as “bisphosphonates.” Every medication has risks and benefits.

All bisphosphonates inhibit osteoclastic (related to bone) activity. They have the ability to, and probably will, inhibit tooth move-

ment during orthodontics. This issue may slow your response to orthodontic movement and lengthen orthodontic treatment time. The effects of these medications may be severe enough to stop tooth movement, which may cause braces to be removed regardless of favorable or unfavorable tooth position. No orthodontist can predict the effect bisphosphonates will have upon an individual’s tooth movement.

Long-term bisphosphonate use has been observed to decrease bone healing. It is possible that tooth movement and any surgery procedures performed within the jaws or bone surrounding the teeth may be difficult, and, in some cases, no bone healing may occur.

The risk for developing osteonecrosis is higher for cancer patients on i.v. bisphosphonate therapy.

I have reviewed this notice, and I understand the issues it describes. I have discussed any questions I have with my doctor. I acknowledge I assume these risks and choose to continue with treatment.

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Signature of Patient/Parent/Guardian

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Date



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