

Oral antiseptic treatments widely used in dentistry have an antiviral impact.

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Introduction

The novel coronavirus SARS-CoV-2 pandemic highlighted a knowledge gap in the fight against viruses. The dentist may be exposed to pathogens from a variety of sources during dental treatment, including contaminated equipment, bodily fluids, blood, respiratory secretions, and saliva. The main causes of this infection risk include the use of disinfection and sterilisation processes that reuse instruments/equipment, the inappropriate use of PPE, and the use of diluted or expired disinfectants [1].

The hunt for antiviral compounds is both urgent and vital. In dentistry, saliva is a polluted fluid with multiple viruses and infectious potential, causing tremendous worry for biosecurity care for both professionals and patients. As a result, under this scenario, every patient must be handled as a potential carrier of the disease and source of transmission, with each service receiving a high degree of attention while adhering to all necessary and suggested protocols to decrease the danger of pathogen transmission [2].

In addition to all biosafety controls and PPE that decrease the professional's contact with viruses, it is critical for the professional to have a feasible alternative that reduces the presence of the virus in the oral cavity, which is a pre-procedure rinse. The World Health Organisation (WHO) proposed using mouthwashes as a pre-procedure to give a safer dental appointment, however no standardised strategy for their usage with antiviral evidence of these compounds exists. As a result, it is critical for dentists and other health practitioners to understand how to minimise viral load using aggregated and up-to-date information. With this in mind, the purpose of this scoping review is to present the evidence from the literature and provide an overview of the influence of mouthwashes on viral load in the mouth in order to unify the most recent information and make it more accessible to dentists.

We chose studies that looked at how mouthwashes reduced viral load against common viruses found in the oral cavity. Primary papers (human and animal studies, case reports and series, experimental laboratory studies) and letters to the editor presenting experimental study results were included. The search took into account studies published in English, Spanish, or Portuguese, and there was no time constraint [3].

Oral and dental professionals play a critical role in addressing the global burden of oral illness and improving health and well-

being. They detect and treat oral diseases, as well as promote oral health. This article examines the historical development of these professionals and their duties, the interdependence of dentistry with general health care, the state, science and technology, patients, and the public, and the possibility for collaborative action. Addressing local and worldwide disparities in access to affordable health care, building an appropriate skill mix for the dental team, and ensuring a stronger emphasis on prevention as part of excellent care are all future public health concerns. Minimal Intervention Dentistry (MID) is an evidence-based approach to oral health care that strives to keep teeth functioning and caries-free for life. The goals of MID are met through implementing critical disease control techniques. The primary strategies included early detection, risk assessment, and care planning; disease control and prevention; minimally invasive surgical management; and repair rather than replacement of restorations [4].

In the last 20 years, scientific literature from all across the world has backed the MID concept. The awareness of MID is developing in tandem with the body of scientific evidence. To implement the MID strategy and make it the rule, all oral health care collaborators must work together. Furthermore, the FDI World Dental Federation advocates MID as the most recent method of controlling dental cavities. The FDI Policy Statement on MID for the management of dental caries is based on the most recent best evidence available [5].

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