

## Letters to the Editor

### Diffiam™ mouthwash for dry socket

Sir,

Dry socket (alveolar osteitis) is a complication of dental extractions that can present as severe pain and halitosis between one to three days postoperatively.<sup>1</sup>

The National Clinical Guidelines as outlined by the Royal College of Surgeons of England (reviewed in 2004) include irrigation with warmed chlorhexidine, packing the socket with an obtundent dressing, and prescription of a non-steroidal anti-inflammatory drug (NSAID), if there are no contraindications.<sup>2</sup>

The complications associated with these techniques include possible hypersensitivity, and anaphylactic reactions that can be triggered by chlorhexidine. Several cases of hypersensitivity have been reported, including the death of one patient after rinsing with a chlorhexidine mouthwash in a dental surgery.<sup>3</sup> Mixtures that contain iodine, such as Alveogyl® (Septodont), have been known to elicit similar responses.

Diffiam™ oral rinse (Mylan), which can be bought over the counter for around £7.99, contains 0.15% benzydamine hydrochloride and is recommended as a 15 ml rinse every three hours. Its analgesic and anti-inflammatory properties<sup>4</sup> are greatly beneficial to patients with alveolar osteitis, as inflammation is a central factor. It can save time and money compared with the use of an obtundant dressing, as it can avoid the need for additional appointments to redress and irrigate the socket. We have used it at Southend University Hospital oral surgery department for the past year to treat patients with alveolar osteitis, and their feedback suggests that it effectively relieves their symptoms. A contraindication is that although it is a weak base compared with other NSAID, it is not recommended for patients who are hypersensitive to acetylsalicylic acid or other NSAID.<sup>5</sup>

In summary, compared with the current recommended guidelines for alveolar osteitis, treatment with Diffiam™ oral rinse is more cost-effective and time-effective. Persistent pain, however, warrants clinical assessment. A prospective study to assess its efficacy would ensure that the practice is evidence based.

### Conflict of interest

We have no conflicts of interest.

### Ethics statement/confirmation of patients' permission

Not applicable.

### References

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