

Policy Statement 6.30 – Neurotoxins and Dermal Fillers in Dentistry

1. Position Summary

The use of neurotoxins and dermal fillers in dentistry is dependent on the dentist's clinical judgement that is made in consultation and with the consent of the patient

2. Background

- 2.1. The use of neurotoxins and dermal fillers has become part of the practice of dentistry over the past decade.
- 2.2. The Board has released communiques on the use of neurotoxins and dermal fillers in dentistry and had released an Interim Policy which has been subsequently withdrawn from its website.
- 2.3. The Therapeutic Goods Administration (TGA) has approved the use of neurotoxins for various purposes, however their application for cosmetic purposes is classified as Off-Label Use.
- 2.4. Off-Label use is unavoidable and very common. The TGA does not assess off-label uses and they are therefore regarded as experimental.
- 2.5. Off-Label use of scheduled medication requires clinical judgement and consent of the patient.
- 2.6. The use of neurotoxins and dermal fillers may be limited by state and territory drugs and poisons legislation.

Definitions

- 2.7. BOARD is the Dental Board of Australia
- 2.8. CONTINUING PROFESSIONAL DEVELOPMENT is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop personal and professional qualities required throughout their professional lives.
- 2.9. DENTAL PRACTITIONER is a person registered by the Board to provide dental care.
- 2.10. A DENTIST is an appropriately qualified dental practitioner, registered by the Board to practise all areas of dentistry.
- 2.11. DENTISTRY is the science and art of preventing, diagnosing and treating diseases, injuries, developmental and acquired defects of the teeth, joints, oral cavity and associated structures
- 2.12. NEUROTOXINS are substances that interfere with conductivity of motor nerves, thus preventing them from functioning
- 2.13. OFF-LABEL USE is when a drug is prescribed for an indication, a route of administration, or a patient group that is not included in the approved product information document for that drug.

3. Policy

- 3.1. Dentists are the only dental practitioner qualified to administer neurotoxins and dermal fillers.
- 3.2. Dentists must comply with any requirements of the Board and their state and territory drugs and poison legislation, including appropriate legal consent requirement. Dentists who use neurotoxins and dermal fillers as part of their practice of dentistry or adjunctive to dentistry will be expected to complete a program of training to ensure the safety of the public.

- 3.3. Before administering neurotoxins and dermal fillers dentists must have knowledge of and skills in:
- patient assessment and consultation for neurotoxins and dermal fillers;
 - indications and contraindications for their use;
 - safety and risk issues for neurotoxins and dermal filler injectable therapy;
 - proper preparation and delivery techniques for desired outcomes;
 - enhancing and finishing treatments with dermal fillers;
 - the pharmacology of neurotoxins and dermal fillers;
 - adverse reactions and management of possible complications; and
 - the appropriate treatment of temporomandibular disorders with neurotoxins.
- 3.4. If a dentist does decide to use neurotoxins and dermal fillers off-label then this is a clinical judgement that should be made in consultation with and consent of their patient.
- 3.5. Before using neurotoxins and dermal fillers dentists must confirm that their professional indemnity policy provides cover for the treatment.
- 3.6. Dentists must not delegate treatment involving neurotoxins and dermal fillers

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