

# Policy Statement 2.2.9 – Community Oral Health Promotion: Body Modification and Dentistry

## Position Summary

Body modifications in and around the mouth should be avoided because they can cause bleeding, infection, nerve and tooth damage and other health issues, including potentially fatal consequences. Governments must legislate safety standards in order to ensure that body modifications can only be performed by adequately trained and indemnified persons in a safe environment.

## 1. Background

- 1.1. In Australia body piercing has gained increased popularity since the 1980s and has extended to a wide range of locations on the body.
- 1.2. In particular, piercing in and around the oral cavity has become reasonably common practice in Australia. Common sites include the tongue, lips, lingual frenum and cheeks.
- 1.3. Intra-oral and peri-oral piercings are invasive procedures that carry significant local and systemic health risks. Complications include infection, swelling, bleeding, nerve damage, chipped teeth, gum recession, alteration to speech and swallowing, allergy and the swallowing or inhalation of lost or damaged piercings.
- 1.4. Tongue splitting procedures carry the risk of swelling, infection and of causing medium to long-term difficulties with speaking and eating. Maintaining good oral health and hygiene may also become more challenging after a tongue split.
- 1.5. There are no uniform laws regulating Higher Risk Personal Appearance Services performed on minors in Australian States and Territories, but body modification practitioners may perform such services on adults in all jurisdictions.
- 1.6. In the UK, the Court of Appeal found that tongue splitting, when performed by a body modification practitioner for no medical purpose, constitutes grievous bodily harm even if someone has given consent, and is therefore illegal.
- 1.7. In Australia, tooth modification, which includes tooth sharpening, is a restricted act of dentistry and so is illegal for it to be done by anyone other than a dental practitioner or medical practitioner.
- 1.8. Oral Body Modification can be seen in all age groups and is more common in young adults but there is legislation that prohibits certain body modifications on minors.
- 1.9. Typically, body piercings are performed without the use of local anaesthetic.

### Definitions

- 1.10. A DENTIST is an appropriately qualified dental practitioner, registered by the Board to practise all areas of dentistry.
- 1.11. BOARD is the Dental Board of Australia
- 1.12. BODY MODIFICATION (or body alteration) is the deliberate permanent altering of the human anatomy or human physical appearance.
- 1.13. DENTAL PRACTITIONER is a person registered by the Board to provide dental care.
- 1.14. HIGHER RISK PERSONAL APPEARANCE SERVICES are those body modification services involving skin or mucous membrane penetration procedures where the release of blood or other bodily substance is an expected result. Examples of these services include body piercing, skin implants, tongue splitting, and tattooing.

- 1.15. INTRA-ORAL PIERCING is a piercing where both ends of the piercing apparatus are within the oral cavity. Examples of intra-oral piercing include tongue and frenum piercing.
- 1.16. MEDICAL PRACTITIONER is a person registered by the Medical Board of Australia to be able to use the title Medical Practitioner and be recognised to receive Medicare and other benefits.
- 1.17. PERI-ORAL PIERCING is a piercing where one end of the piercing apparatus is located within the oral cavity and the other end penetrates the skin surface. An example of this type of piercing is a lip stud or ring (labret).
- 1.18. VALID CONSENT to treatment means consent to treatment which is voluntarily given by a competent person based on full disclosure and understanding of information and includes authorisation for a specific treatment plan by a specific health care provider.

## 2. Position

- 2.1. Clinically indicated tooth modifications must only be done by an appropriately qualified Dental Practitioners.
- 2.2. Other irreversible body modifications of the oral cavity including of the natural dentition should not be performed and Dental Practitioners should discourage individuals from having body modification in their oral cavity.
- 2.3. Valid consent must be obtained prior to undergoing higher risk personal appearance services, including the provision of information that is written in plain language and does not unduly emphasize the glamorous or cosmetic aspects of the Body Modification procedure. The information should also include details on health risks, usual post-insertion care, and signs and management of complications.
- 2.4. State and Territory governments should introduce uniform legislation to ensure that persons under the age of 18 years cannot undergo higher risk personal appearance services.
- 2.5. Governments must regulate higher risk personal appearance Services to ensure adequate safety standards are in place to protect the public.
- 2.6. Persons who provide higher risk personal appearance services must be adequately trained and indemnified in the event of an adverse outcome.
- 2.7. A three-day waiting period after the initial request for higher risk personal appearance services, including tongue splitting, teeth sharpening and intra-oral or extra-oral piercing, should be mandated to prevent spur-of-the-moment decisions and allow full and proper valid consent.
- 2.8. An appropriate review appointment following a higher risk personal appearance service must be scheduled to check the healing process.
- 2.9. Individuals who have undergone any form of oral body modification should regularly visit a dentist to manage the consequences of damage to the oral cavity.

### **Policy Statement 2.2.9**

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