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# ORAL PIERCING COMPLICATIONS

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## AIM

Body piercing indicates the puncturing of a part of the body in which jewelry may be worn. In the last years, oral piercing has particularly spread especially among young people. Body piercing has to be considered as a surgical procedure to all intents and purposes and, as such, has to be performed only by qualified personnel. The aim of the present work is to verify which risks patients are concretely exposed to and which complications may occur after an healthcare professional performs oral piercing.

#### **MATERIALS AND METODS**

The present study includes one hundred and eight patients (74 males and 34 females) aged between 14 and 39 years, who presented with oral piercing done 12±4 months earlier. After initial *counseling*, patient medical history was analyzed to identify useful information that could reveal the onset of intraoperative and postoperative complications. Finally, the patients underwent clinical examination to reveal the possible presence of late complications.

# **RESULTS**

After piercing, neither of the 108 patients developed widespread complications. Although all patients said they had followed the piercer's indications, 96% of them reported postoperative local complications such as bleeding within 12 hours of piercing (90%), perilesional edema for 3±2 days after piercing surgery (80%), persistent mucosal atrophy (70%), enamel abrasions (30%), enamel fractures (30%), gingival recession (25%), erythematous palatal mucosa (15%), dentine hypersensitivity (15%).

## **DISCUSSION AND CONCLUSION**

The analysis of results shows that the area that most of the recruited patients prefer to pierce is the tongue: this seems to be in agreement with the recent literature. In fact, It is important to underline that this area is at highest risk for hemorrhagic complications, because of the extensive vascularization in the tongue. In our study, no systemic complications were identified. However, it seems very important to underline that body piercing should always be done by medical staff in a clean room. As a matter of fact, it is clear that the risk of systemic complications is significantly higher when body piercing is done by untrained personnel without sanitary inspections.

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