

Laughing Gas Sedation Dentistry For Kids



Does the thought of having your child's teeth treated make you tense with fear? Would you rather endure the agony of your child's toothache than step foot in a Pediatric Dentist's office? You're not alone. A lot of parents are so phobic about going to the dentist that they prefer not to have any dental treatment for their child as well.

What Is Laughing Gas Dental Sedation?

Nitrous Oxide (N₂O), more commonly referred to as 'laughing gas', is used as a local sedation method. It is a colourless and odourless gas. Nitrous oxide is effective as a sedative because it relaxes patients with the pleasurable feelings it emits. It is a safe and effective sedative agent that is mixed with oxygen and inhaled through a small mask that fits over the nose to help the child relax. This method of sedation is not intended to put a child to sleep (Henceforth, the term **Inhalation Conscious Sedation**). The child will be able to hear and respond to any requests or directions the Pediatric Dentist may have. The Pediatric Dentist will ask the child to breathe normally through the nose, and within a few short minutes the effects of nitrous oxide are begin to be felt (such as light-headed or a tingling sensation in the arms and legs). Children remain awake during the entire procedure and may have a "happy" feeling. When the procedure is complete, the nitrous oxide is turned off and the child is made to breathe in pure oxygen for about 5 minutes to clear out any remaining Nitrous Oxide gas. Nitrous oxide's usefulness also stems from how quickly it works and that its effects are rapidly reversible. For those and other reasons, **Nitrous Oxide Inhalation Conscious Sedation (NOIS)** is widely considered to be a safe clinic procedural sedation method.

Contraindications For Nitrous Oxide Sedation

While it's an effective sedative that's easy to administer, nitrous oxide might not be the right choice for some children, notes the American Academy of Pediatric Dentistry. It should be informed to the Pediatric Dentist if the child has any of the following conditions: COPD (chronic obstructive pulmonary disease), a methylenetetrahydrofolate reductase deficiency, or a cobalamin deficiency. It should also be avoided if a child has been receiving Bleomycine Sulfate for a certain treatment.