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KNOWLEDGE, ATTITUDES AND PRACTICES OF ALEXANDRIA DENTISTS CONCERNING THE HEPATITIS B VACCINE

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Introduction:

Hepatitis B infection is the most critical infectious occupational hazard for the dental professional⁽¹⁾. Dental personnel have a 5-10 fold greater chance of acquiring infection than the population at large. Hepatitis B infection may be a severe or even fatal acute resulting in possible work loss, infection in one's family, development of a carrier state or all three. A carrier state can result in chronic liver disease such as cirrhosis or primary hepatocellular carcinoma. Dental personnel with acute or chronic hepatitis B may, although rarely, transmit the infection to their patients⁽²⁾.

Transmission in dental practice occur through percutaneous contact with infectious body fluids such as blood and saliva. The virus is high in infectivity as little as 1^{-8} ml of blood is capable of transmitting hepatitis B. Hepatitis B which is a hardy virus has been shown to remain viable after storage at room temperature for 6 months, for 4 hours at 60°C and 15 years at -20°C. Moreover, the virus is capable of surviving up to 7 days or longer on surfaces at room temperature. This capacity is of particular significant in dental practices, where a wide range of instruments and materials is employed^(3,4).

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