

Hotel Diamante, Alessandria  
Sabato 5 maggio, 2018.



Azienda Ospedaliera Nazionale  
SS. Antonio e Biagio e Cesare Arrigo  
Alessandria



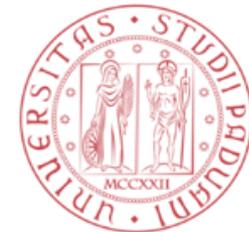
## **ONJ UPDATE 2018**

**OSTEONECROSI DELLE OSSA MASCELLARI (ONJ)  
DA BIFOSFONATI E ALTRI FARMACI:**

*PREVENZIONE, DIAGNOSI, FARMACOVIGILANZA, TRATTAMENTO*

# The European Working Group on MRONJ

**Alberto Bedogni, M.D. FEBOMS**



# Declaration: No potential Conflicts of Interest

Faculty: **Alberto Bedogni, MD, FEBOMS**

- *Director, Regional Center for Prevention, Diagnosis and Treatment of Medication and Radiation-related Bone Diseases of the Head and Neck (DGR 2707, 12/2014) Hospital Trust of Padua, Italy*
- *Assistant professor, Unit of Maxillofacial Surgery, Department of Neuroscience-DNS, University of Padua*
- *Board member of the Expert Panel Recommendations of the Italian Societies for Maxillofacial Surgery (SICMF) and Oral Medicine and Pathology (SIPMO) on MRONJ*

# EU MRONJ Work Group 2017



# INTERNATIONAL SYMPOSIUM ON MEDICATION RELATED OSTEONECROSIS OF THE JAWS (MRONJ)

*COPENHAGEN (DK), 29th of September 2017*



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**Alberto Bedogni**

**Stefano Fedele**

**Roman Guggenberger**

**Nicolatu-Galitis**

**Thomas Kofodt**

**Sven Otto**

**Morten Schiodt**

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**Eastman Dental Hospital (UK)**

**University of Zurich, (CH)**

**University of Athens, (Hellas)**

**Rigshospitalet, University of  
Copenhagen (DN)**

**Ludwig-Maximilians-University  
of Munich, (D)**

**Rigshospitalet, University of  
Copenhagen (DN)**

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# WORKFLOW

1. Identify key questions
2. Formulate and make priority of questions
3. Plans for proceeding and solution
4. **Consensus paper:**
  - What do we agree on?
  - what do we not agree on?
  - Where do we need more knowledge?
  - Which studies or effort should be taken to proceed?

# key questions

## 1. MRONJ definition:

- Adverse drug reaction?
- Just Clinical?
- 8 weeks delay?

2. Should **imaging** be incorporated in the diagnosis and Staging of disease?

3. How do we identify **early MRONJ**?

4. Early MRONJ: how we differentiate it from periodontal disease

## The working group agreed on the following key statements:

- **8 weeks of persistent clinical signs delay diagnosis and the start of treatment and should be cleaned out from the definition**
- **The current AAOMS classification criteria does not identify all patients suffering from MRONJ**
- **Stage 0 is not a valuable classification and should be abandoned**
  - patients on antiresorptive treatment at risk for MRONJ, but not having MRONJ
  - 2: patients with non-exposed MRONJ (clinical signs other than fistula)
- **Imaging should have a place in classification of MRONJ**
- **The expanding group of medications (targeted therapy) and expanding group of cancer diagnoses is a new and growing challenge.**

# 2<sup>nd</sup> INTERNATIONAL SYMPOSIUM ON MEDICATION RELATED OSTEONECROSIS OF THE JAWS (MRONJ) IN COPENHAGEN

## PLACE OF SYMPOSIUM

**LOCATION:** Center For Leadership (CFL)

**ADDRESS:** Folke Bernadottes Allé 45  
2100 Copenhagen  
Denmark



## INFORMATION ON REGISTRATION AND PAYMENT

**CHAIRMAN:** Morten Schiødt

**CONTACT PERSON:** Line Lund Eriksen

**TELEPHONE:** +45 3545 5181. Monday-Thursday 07.30-14.30.

**EMAIL:** (email address to come)

**PRICE:** (price to come)

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