Oral Healthcare in Individuals with Special Healthcare Needs

Prevalent oral health problems and treatment challenges



Oral health has a major impact on the overall health and well-being of an individual¹

Global status of oral health



Oral health encompasses good oral function and psychosocial well-being without pain, discomfort, and embarrassment



More than 3.5 billion people experience impaired oral health due to oral diseases

The most common oral health conditions in adults include^{1,2}



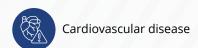


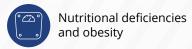
Healthy mouth



Unhealthy mouth

Oral health associations with chronic diseases²







Psychological and cognitive disorders











- Dental trauma - Poor oral hygiene

- High sugar diet

- Hyposalivation induced by medication/therapy/disease

- Tobacco use
- Alcohol consumption
- Gastroesophageal reflux disease

Risk factors

- Oro-facial dyskinesia
- Delayed oral treatment



People with special healthcare needs (SHN) include those who have physical, developmental, behavioural, cognitive, sensory, and mental health impairments. The condition could be developmental, congenital, or acquired through trauma, systemic diseases, or environmental causes³



Oral diseases in individuals with SHN include²⁻⁹

- Untreated dental caries
- · Periodontal disease
- Gingival inflammation
- Dysphagia
- Malocclusion
- Drooling
- Dental erosion
- Bruxism
- Oral infections
- High number of missing teeth

Impact of oral diseases in people with SHN²



Pain and discomfort



Local or systemic infection and chronic inflammation



Difficulty in speaking



Halitosis



Impaired quality of life



Nutritional deficiencies



Low self-esteem and social isolation



Impaired chewing and swallowing



Sleep disturbances



Behavioural changes



! People with SHN may experience or express pain differently, which can be misinterpreted by clinicians¹⁰



! They rely on staff observing and interpreting signs and clinicians bringing together key information to aid diagnosis¹⁰



Structural-level interventions¹⁰

Dental healthcare staff should be aware of how to recognise and record oral pain behaviours in individuals with SHN, especially non-verbal pain indicators

Policy-level interventions¹⁰

Policies should include a care pathway for referring individuals in pain in a timely fashion with supporting information, to aid the clinician with the diagnosis



Despite a greater need for preventative care and dental interventions, certain barriers result in people from such vulnerable groups having lesser access to oral healthcare services¹



Good oral health is a right of individuals with SHN and cannot be separated from the overall health of a person



Most oral diseases are preventable and should be treated through an interdisciplinary approach in which not only dentists, but all health professionals are involved, especially for patients with SHN



There is an urgent need to understand the treatment challenges in oral healthcare and devise measures that improve outcomes for patients with SHN



Barriers experienced by patients with SHN in accessing dental care¹

Individual level



Inadequate dental care at early ages or a lack of primary prevention



Poor understanding of how to access appropriate dental services



High sugar diet



Care-resistant behaviour and inability to give consent for treatment



Lack of services to access professional help



Lack of awareness on treatment options for SHN



Fear or anxiety of being stigmatised by healthcare practitioners



Hesitation to undergo sedation or general anaesthesia



Fear of tooth decay resulting in extraction rather than restoration



Not receiving support to maintain a good oral care routine



Consultations with non-dental healthcare providers who lack expertise in oral health



Care dependency and multi-morbidity



Inability to afford the treatment if not included in an adapted health insurance policy

Institutional level



Lack of availability of appropriate dental services for patients with SHN



Lack of expertise, education, and training in managing patients with SHN



Lack of protocols and customised services for the management of vulnerable patients



Risk of undertreatment associated with the lack of specialised dentists



Lack of preventive programmes for individuals and low priority to oral hygiene provision among caregivers



Unwillingness to treat and negative attitudes of dental healthcare professionals on encountering patients with SHN



Shortage of staff and time limitations



Risk of multiple extractions instead of a restorative and conservative approach under general anaesthesia

Policy level



Poor oral health literacy of citizens



Lack of public services catering to vulnerable groups



Socioeconomic inequalities in oral care access



Limited training modules established for dental healthcare professionals for the management of patients with SHN



Limited availability of domiciliary dental care, access to wheelchair services, and disability-friendly services



Lack of public funding to dental clinics for the provision of specialised services

Recommendations for dental and healthcare professionals for the treatment of individuals with SHN1.2.3.11



Encourage preventive measures to decrease the risk of oral problems



Opt for multidisciplinary approach to manage complex cases



Offer healthcare that caters to SHN by promoting individualised oral health practices



Opt for early preventive and myofunctional orthodontic approach in children with SHN



Offer assistance in scheduling appointments and follow-up visits



Prevent dental caries early using fluoride gel/varnishes and minimally invasive dentistry



Familiarise with the patient's medical history, needs, and fears



Manage the risk of caries



Ensure equality of access to dental care through policy-level changes



Educate the patient and/or caregiver and obtain informed consent



Subsidise services for patients with SHN



Integrate dental care with healthcare, social, and community services for a holistic treatment approach



Implement policies to address the challenges faced by vulnerable groups



Include SHN treatment strategies in the undergraduate training for all oral health professionals



Enhance communication with the patient based on their intellectual level, since patients with hearing or visual impairment may require non-verbal communication and cues



Promote collaboration in the dental setting through individualised approach and desensitisation, in order to limit the need for dental care under general anaesthesia



Consultation between dentist and non-dental care provider should be encouraged to discuss about medications, sedation, general anaesthesia, and any other special restrictions and considerations



Implement educational training for practitioners and outreach for the management of patients with SHN

Key takeaway

- People with SHN are at a risk of developing poor oral health
- Dental care providers must be aware of the needs of patients with SHN
- All healthcare providers need to be aware of the importance of prevention for oral health diseases and how to direct patients with SHN to appropriate dental services
- Taking into consideration the challenges faced by patients with SHN can help practitioners and policy-makers devise an appropriate treatment approach that caters to their specific needs

References:

- 1. El-Yousfi, S., Jones, K., White, S. and Marshman, Z. (2019). A rapid review of barriers to oral healthcare for vulnerable people. British Dental Journal, 227.
- 2. Patrick L., Anders, P.L. and Davis, E.L. (2010). Oral health of patients with intellectual disabilities: A systematic review. Special Care in Dentistry, 33(3), 110-117.
- 3. Oral care and people with learning disabilities. (2019). Public Health England.
- 4. Cannobbio, V.C., Cartes-Velásquez, R., and McKee, M. (2020). Oral health and dental care in deaf and hard of hearing population: A scoping review. Oral Health and Preventive Dentistry, 18(1), 417-425.
- 5. Blanco López, M. A., Diniz Freitas, M., Limeres Pose, J., Hernández, G., and López-Pintor, R. M. (2022). Oral health status and dental care for individuals with visual impairment. A narrative review. Special Care in Dentistry. 1–11.
- 6. Como, D.H., Stein Duker, L.I., Polido, J.C., and Sharon A. Cermak, S.A. (2021). Health and autism spectrum disorders: A unique collaboration between dentistry and occupational therapy. International Journal of Environmental Research and Public Health, 18, 135.
- 7. Lansdown, K., Smithers-Sheedy, H., Coulton, K.M., and Irving, M. (2019). Oral health outcomes for people with cerebral palsy: a scoping review protocol. The Joanna Briggs Institute Database of Systematic Reviews and Implementation Reports.
- 8. Practical oral care for people with cerebral palsy. (2009) Practical Oral Care for People with Disabilities Series Booklet. NIH Publication.
- 9. Leah, S.D., Marinthea, R., J. Christianne, L., C. Jose, P., Sharon, C. (2022) Oral care experiences and challenges for children with Down syndrome: Reports from caregivers. Pediatric Dentistry, 42, 6.
- 10. MORE than WORDS (MtW) A novel non-verbal orofacial pain assessment pathway
- 11. Management of dental patients with special health care needs. (2021). The Reference Manual of Pediatric Dentistry. American Academy of Pediatric Dentistry.



