

# Differently Abled – A Dental Public Health Challenge

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## ABSTRACT

Oral health care for children and adults with disabilities is a health care area that has received scant attention. It is seen that most persons with a significant disability cannot find a professional resource to provide appropriate and necessary dental care. Lack of access to dental services for this growing segment of our population is reaching critical levels and is a national dilemma.

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## INTRODUCTION

People with physical disability are entitled to equal standards of health and care as their able bodied cohorts. It is mostly seen that oral health care comes far down in the list of priorities where handicapped people are concerned (1). This is possibly due to the fact that handicapping condition itself is of major concern and oral health care is forgotten.

Also for a person who may be mentally or physically handicapped, to maintain good oral hygiene by his or her own efforts is difficult. Further parents, guardians, helpers and teachers may not know how to provide adequate oral hygiene maintenance and may not understand its significance (2).

This lack of awareness is largely due to limited dissemination of information on the importance of oral health. Studies have shown that special needs patients' finds difficulty in obtaining dental care in the public and private sector as dental surgeons are reluctant to treat these patients (3,4). Further more lack of preparation and clinical experience in their dental education prevents many dentists from accepting handicapped people as patients (5).

## INGREDIENTS BASIC TO SUCCESSFUL MANAGEMENT OF THE HANDICAPPED PATIENT

The successful management of a handicapped patient depends more on the social adjustments (6) necessary for his dental treatment than on the technical and mechanical adjustments that may become necessary to the actual dental manipulative procedure itself.

### BE A LISTENER

Successful patient management depends upon paying careful attention to the small details that become important to the handicapped patient. Through conversation with the parents you will gain a simple appraisal of the child's abilities, likes and dislikes, comprehensive skills, desires, and needs.

What can he do for himself? What are his activities of daily living? Can he dress, can he manage his hygienic duties, does he learn well? Be a patient listener, and on each visit you will become more familiar with the manner in which you can apply your help most effectively.

### Be an Observer

We should observe that:

- Does the patient have any severe physical problems that would preclude or complicate dental treatment?

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- What range of motion does he have? Does he/she wear special prosthesis?
- Can the child communicate, or does the family communicate for the child?

All these questions become important in outlining a course of treatment which may be useful in rearranging the operator for procedures to be done with the patient in a wheel chair. Obviously the patient and the attendant will be put at greater ease if the dentist recognizes the limitations imposed by the handicaps and plans treatment accordingly.

### Be Patient

The handicapped person takes great pride in accomplishing tasks that others of his age can do (7). The dentist must be satisfied (and even gratified) with progress that is often slow. The dentist who is accustomed to preparing and restoring a tooth in one visit for a normal patient may have to take a longer time to accomplish the same procedure in a handicapped patient. There are no tricks, no short-cuts, and no excuses for poor quality dentistry; if necessary, it is appropriate to spend a longer time to achieve the proper end result.

### Express Empathy

By projecting ourselves into the patient's or parents' shoes, we are displaying empathy. How would you wish to be treated if you were the patient? What if these were your son or daughter? You must offer intelligent and well thought out support to both patient and parent for the dental visits and for the subsequent home care.

### Participate in the "Team"

The family of a handicapped patient is likely to receive guidance from the family physician and supportive specialties as well as community agencies such as counseling services and the school system. As the dental practitioner becomes interested in the general capabilities of his patient, he should discuss these with others in the community with whom the family and patient have been in contact. Frequently information is gained that will directly affect the success of dental treatment. The dentist

who becomes a member of the community health "team" will always find the experience rewarding.

### Dentist's Attitude

Probably the greatest dental problem faced by the handicapped patient is the attitude of the dentist. The individual dentist too often feels inadequate to successfully manage the treatment of such a patient, and these feelings of inadequacy are generated by impatience. Frequently the uncooperative patient disrupts the usual efficient routine of the office to the degree that, the practitioner "will do what he can" in a minimum of time and effort. Quite occasionally this amounts to a hurried and forceful examination and referral to the oral surgeon for extractions under a forced application of a general anesthetic agent. This attitude is one of rejection or abandonment of the patient. Thus, good dental management of such patients is not possible in the absence of an attitudinal change on the dentist's part.

### STRATEGIES FOR IMPROVEMENT OF ORAL HEALTH

Primary prevention approaches should be taught to the staff of the handicap institution, to the caregivers and, when appropriate, to the individual patient (8). Since the major problem to be tackled is improvement of the oral hygiene of these children, programmes that include oral hygiene in a child's individual plan should be encouraged.

Greater emphasis needs to be placed upon the importance of maintaining the natural dentition in this population as long as possible (9).

If the children's efforts are integrated with those of a motivated dentist, dental hygienist and staff, a well-planned programme of preventive dental health can lead to a high degree of success in the prevention of dental diseases in this population.

### Preventive Measures

- In this high-risk population, pit and fissure sealants should be applied to

permanent teeth soon after eruption, as these measures are highly effective in preventing occlusal caries.

- Optimising fluoride in drinking water remains the cornerstone for prevention; but in its absence, dietary fluoride supplements, fluoride toothpaste and topical applications are recommended.
- Daily use of Xylitol chewing gums for caries reduction is recommended (10).
- Interceptive Orthodontic treatment for children with disabilities should be taken into account in future planning of oral health care.
- Preventive measures with regard to trauma to the face, jaw and teeth need to be included in the school curriculum.

### Oral Health Education

- Oral health education should include plaque control measures, diet control and regular dental checkups.
- Dietary advice for children with disabilities should be made within the context of healthy eating policies. General medical practitioners should be made aware of the oral health risks of long-term sugar-based medication and, when possible, they should prescribe sugar-free alternatives.

### School Oral Health Services

- Regular supervised toothbrushing and fluoride mouth rinsing programmes should be conducted.
- Basic treatment needs of these individuals with disabilities should be met in their institutional premises with the help of dental institutes.

### Reorienting Dental Education

To enhance oral health outcomes for such population, advanced training is recommended for dental professionals in dental education curriculum (11).

### CONCLUSION

The greatest challenge that people with disabilities have had to face has been society's misperception that they are "breed apart", as historically they have been pitied, ignored, vilified or even hidden away in institutions.

With adequate training and understanding of the various handicapping conditions and with adequate alteration in the dentist's treatment protocol these patients can be managed well.

Providing comprehensive dental care for this differently abled group is not only rewarding but is also a community service that health care providers are obligated to fulfill.

What truly matters in this life is helping others win, even if it means slowing down and changing our course...

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