

Improving the oral health of adults with special needs proves challenging

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A comprehensive study using electronic dental records to profile the oral health status of adults with intellectual and developmental disabilities (I/DD) has concluded that access to specialized dental care alone is not sufficient to meet the community's substantial oral health needs. The findings, published as the cover article in the August issue of The *Journal of the American Dental Association*, provide a foundation for further investigation into the significant oral health needs of adults with I/DD and the development of preventive oral health strategies.

The study of dental records of 4,732 people, led by <u>dentists</u> and public health professionals at Tufts University School of Dental Medicine (TUSDM) and Tufts University School of Medicine (TUSM), was conducted at the Tufts Dental Facilities Serving People with Special Needs (TDF), a network of Massachusetts <u>dental clinics</u> that provides oral health care to people with disabilities.

Each year, Tufts' program, which is recognized by the Association of State & Territorial Dental Directors as a national model, serves more than 7,000 patients at seven clinics in Massachusetts. The findings released today are the first of a three-part study conducted by principal investigators John Morgan, D.D.S., associate professor in the department of public health and community service at TUSDM, and Paula Minihan, Ph.D., M.P.H., assistant professor in the department of public health and community medicine at TUSM.

"People with intellectual and developmental disabilities are more likely



to have poor oral hygiene, periodontal disease and untreated tooth decay than the general population," said Morgan. "Our findings highlight the need for greater awareness of the unique and complex dental health care needs of this population. The roles of the patient, care giver and dental provider are all vital in developing preventive strategies to improve oral health."

Morgan and colleagues analyzed clinical and demographic data documented in electronic dental records over a one-year period. They investigated oral health conditions (e.g. dental caries (cavities), periodontal (gum) disease, etc.), age, gender, ability to receive dental examinations and procedures, level of disability, and type of residence. Of the 4,732 patients whose records were reviewed, 61% were reported to have a mild to moderate disability, and 39% were assessed as having a severe disability. Dental records revealed a high burden of oral disease, including dental caries (cavities), periodontitis (gum disease) and missing teeth.

Nearly 25% of the patients had a limited ability to accept any dental intervention and required specialized resources, such as general anesthesia. Almost 40% of all patients able to accept dental treatment required some form of behavioral assistance. These behavioral challenges pose difficulties for dental staff when providing diagnostic and therapeutic procedures. "Behavioral challenges present barriers to good oral health and overall health," Morgan said. "Often patients with significant developmental disabilities cannot tolerate complex and time consuming dental treatments."

"From a public health perspective, our findings signal the need for the development of best practices for dental treatment guidelines that promote and protect the oral health of this vulnerable population," said co-investigator Aviva Must, Ph.D., professor and dean of <u>public health</u> and professional degree programs at TUSM. "Further research is



required to identify and develop risk-based preventive interventions to manage oral diseases for people with intellectual or developmental disabilities and maximize the role of the dental professional, patient, and caregiver in promoting <u>oral health</u>."

More information: Morgan J, Minihan P, Stark P, et al. The oral health status of 4,732 adults with intellectual and developmental disabilities. *J Am Dent Assoc* 2012;143(8):838-846.

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