

Oral pain specialists treat complex health issues, according to new survey

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Andres Pinto, an orofacial pain and oral medicine specialist at Case Western Reserve University School of Dental Medicine, often feels like the doctor in the television series House, who solves medical mysteries each week.

Pinto is among about 700 <u>facial pain</u> and <u>oral medicine</u> specialists nationally who patients often turn to when their own doctors are unable to identify and treat complex and rare medical conditions. In fact, according to a new study Pinto conducted with input from fellow members of the American Academy of Oral Medicine (AAOM), patients see, on average, 2.2 doctors over 17 months before visiting facial <u>pain</u> and oral medicine specialists, hoping to finally find the cause of their discomfort.

Unfortunately, Pinto said, the delay in getting treatment allows the pain to escalate from acute to the chronic stage, reducing the patient's quality of life dramatically.

Patients come from as far as the Gulf States to be evaluated and treated by the team of pain specialists at the CWRU dental school—one of just seven inclusive teams nationally and the only one in Ohio with specially trained head and neck radiologists, oral and maxillofacial medicine and orofacial pain clinicians and oral and maxillofacial pathologists all within one clinical setting.

Pinto, DMD, MPH, FDS, RCSEd, in the dental school's Department of



Oral and Maxillofacial Medicine and Diagnostics Sciences, heads the university's orofacial pain and oral medicine group, which tackles ailments with such exotic names as, idiopathic persistent facial pain, oral chemosensory disorders and glossodynia.

To better understand the work by pain specialists at Case Western Reserve and others nationally, Pinto recently led a research team to survey AAOM members.

The report, which updates a similar industry survey in 1996 and a national database analysis in 2001, is the first to describe in detail the types of patients the specialists see in the United States and the largest to describe the field's characteristics, Pinto said.

Practitioners (74 in 20 states) provided information about patient demographics, referring health-care providers, medical issues, diagnoses and themselves.

Among the findings, reported in April's *Oral Surgery, Oral Medicine, Oral Pathology, and Oral Radiology* article, "The practice of oral medicine in the United States in the twenty-first century: an update":

Almost half of the specialists (46 percent) practiced in dental schools. About a third (31 percent) practiced in hospitals, and 18 percent practiced in combined settings. Only 5 percent were in private practice.

Most specialists received referrals from general dentists and otolaryngologists, hematologists, oncologists, radiation oncologists, rheumatologists and dermatologists. If postdoctoral training in oral medicine and facial pain management is offered, more patients in that particular state will be referred for the services.

The leading cause of the referral was oral lesions, followed by orofacial



pain, dry mouth, burning mouth and oral sores or ulcers. The tongue and gums were predominant sites for pain, but less so for teeth and lips. About one-third of the referred patients reported pain in at least two locations.

Oral lesions and pain caused by oral lichen planus (a skin disease that can occur in the mouth) was the main reason many sought treatment, followed by problems with the salivary glands.

The researchers also examined the link between oral and overall health, and what diseases—such as heart disease, endocrine, rheumatoid and digestive issues—may be associated with oral findings.

The average age of the patients was 57. Nearly twice as many of the patients were women.

Pinto said the study highlighted several changes in the field since the last survey 19 years ago:

- Specialists are seeing more oncology-related oral treatments, from preparation for cancer therapy to management of complications during therapy.
- The pattern of patient referrals demonstrates the breadth of the interprofessional practice with ear, nose and throat surgeons, dermatologists and oncologists, general practice dentists and other health-care providers.

Pinto established the team 14 months ago at the CWRU patient clinics. The clinic is seeing between 50 and 60 patients with complex pain issues weekly.

Provided by Case Western Reserve University



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