

EDUCATION AND TRAINING IN SPECIAL CARE DENTISTRY- A REVIEW

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Abstract

Everyone has equal right to good health and wellbeing, including persons with disability. In almost any community it is possible to see a few individuals suffering from handicaps of varying nature.

These individuals with special health care needs are at increased risk for oral diseases. There are numerous challenges in providing oral health services for people with special needs which go beyond the normal considerations of other population. One of the reasons cited by practitioners for not treating special needs patients is that they have not had adequate training.

The requirement for Special Care Dentistry in the undergraduate curriculum is limited in many countries. This has resulted in a dental profession that, on the whole, feels poorly prepared to provide dental care services for people with disability.

Recognition of SCD as a specialty by the profession and other dental associations and organizations is the need of the hour. This review tries to narrate the situation of special care dentistry training in various part of the world.

Key words: special needs, dental care for handicapped, dentistry for disabled

Introduction:

"Everyone has the right to the standard of living adequate for the health and well being of himself and his family, including medical care and necessary social services" says the United Nations (U.N) Universal declaration of Human rights (1948) Article 25.

This makes it very clear that everyone has equal right to good health and wellbeing, including persons with disability. Disability is a complex phenomenon

difficult to define reflecting an interaction between features of the person's body and features of the society in which he or she lives. [1]

An estimated 10% of world's population approximately 650 million people experience some form of disability. [2]

The above figures disclose that the number of people with disabilities is growing at a faster rate as a result of factors such as population growth, ageing, and

medical advances that preserves and prolongs life. In almost any community it is possible to see a few individuals suffering from handicaps of varying nature. [2]

These individuals with special health care needs are at increased risk for oral diseases. Patients with mental, developmental or physical disabilities who do not have the ability to understand and assume responsibility for or to cooperate with preventive oral health practices are highly susceptible to dental diseases. [3]

There are sufficient recent evidences in various parts of the world that confirms that this group of population is doomed with poor oral health due to direct and indirect effects of their disabilities and also have difficulties in obtaining dental treatment due to various factors. [4-9]

These factors place a considerable demand on the existing general and oral health care delivery systems.

There are numerous challenges in providing oral health services for people with special needs which go beyond the normal considerations of other population. The impairment will always be important when deciding upon the clinical treatment, a patient centered approach is essential to ensure that disabled service users have same level of access, informed choice and customer service as anyone else. [10]

These challenges require oral health professionals to have extraordinary training, empathy, patience and desire to be successful in treating this population. [11]

'The Special Care Dentistry (SCD) is concerned with, the improvement of oral health of individuals and groups in the society who have physical, sensory, intellectual, mental, medical and emotional or social impairment or disability or more often a combination of a number of these factors, it also includes people with range of disabilities and complex additional needs, homebound individuals, people in long stay

residential care and secure units as well as homeless people.' [10]

Lack of training in Special Care Dentistry:

One of the reasons cited by practitioners for not treating special needs patients is that they have not had adequate training at the undergraduate level.

The acute shortage of professional and nonprofessional personnel who can serve the oral health needs of persons with disabilities in community and institutional settings has been well documented. Education in special patient oral health care is needed at all levels, from advanced training for dental professionals, to interdisciplinary instruction for professionals in other health and social service fields, to ongoing courses for nurses' aides and personal attendants. [12]

According to statewide surveys of practitioners in private practice in the 1980s, the number willing to treat patients with disabilities was in the range of 20 percent. The majority of private practitioners willing to accept patients with special needs had neither training nor extensive experience in this field. They were selective in whom they would accept and indicated a greater reluctance to treat persons with developmental or psychiatric disabilities than with physical problems. Furthermore, a survey of 300 state institutions for persons with developmental disabilities revealed that more than 80 percent of 283 responding dentists were poorly prepared or unprepared for treating their facility's residents; for 85.9 percent of the dentists, training was "on the job." Responses by dental auxiliaries indicated even less preparedness. [13]

Current training:

Individuals who have undertaken training in Special Care Dentistry (SCD) have been responsible for their own training, formal and informal, perhaps with the

support of a proactive manager, and often on an ad hoc basis. This must be formalized in the current changes. It should not be left to the individual dentist to fund their training in SCD, as with some of the dental mono-specialties. [14]

Evolving career paths for professional development in this field have seen the institution of various undergraduate curricula and postgraduate programs and fellowships in the US, Canada, Europe, and the UK, including a range of formal and informal qualification. However, to date, none of these qualifications has resulted in the recognition of dental professionals as specialists in this field of dentistry. [15]

The requirement for SCD in the undergraduate curriculum is limited in many countries. This has resulted in a dental profession that, on the whole, feels poorly prepared to provide dental care services for people with disability and one that, in the main, finds it difficult to do so. In United Kingdom, the British Society for Disability and Oral Health (BSDH) is reviewing current undergraduate training in SCD and making recommendations for curriculum development. The future specialist will need to contribute to the teaching and training of undergraduates, postgraduates and the wider dental team. In the long term, this will enable more care to be mainstream. [14]

Undergraduate training in various places: [16]

Evaluation of undergraduate teaching has revealed a previously ad-hoc approach to education in special care dentistry and found that the principles of holistic care of the so-called 'special needs' patient was lacking in many dental undergraduate curricula. In U.K The General Dental Council's undergraduate curriculum document, first five years, although not prescriptive, outlines subject matter that must be an integral part of a dental course, including many areas

pertinent to special care dentistry. Consequently, in 2002 BSDH produced a framework document that has served as a template for dental schools revising their curricula.

In Dublin undergraduates have access to a comprehensive e-learning resource and take part in small group weekly online tutorials via a special care real-time web forum.

King's College London Dental Institute provides a short lecture course before students spend time in the department of special care dentistry providing treatment with and without conscious sedation.

Cardiff has recently introduced a comprehensive special care curriculum with a core lecture course and dedicated student sessions in the sedation and special care suite.

Whereas Birmingham has elected for a didactic special care lecture series alongside innovative workshops on instant ageing and patient management using role play with professional actors.

Special care dentistry is also required as part of the curricula for dental nurses, hygienists and therapists, thus enabling them to participate as informed members of the dental team in the provision of oral healthcare for people with disabilities.

Teaching modules for dental students: [17]

Teaching dental students to empathically and effectively care for patients with special needs is a challenging task, given that dental students frequently do not have access to these patients in their clinical training.

b. The Pre service Health Training Adult Dental Module: [17]

The Pre service Health Training Adult Dental Module in Kentucky represents an approach to dental education emphasizing patient care, communication skills, professionalism, and positive attitudes

towards patients with developmental disabilities. The module focuses on both essential dental considerations, as well as strategies that will build rapport and maintain good communication with patients with both developmental disabilities and significant issues in communication.

c. Virtual patient module: [17]

The development of "virtual patient" case studies provides opportunities for students to practice and reflect upon their potential responses and decision-making strategies before they are called to treat actual patients with deaf blindness and other developmental disabilities in clinical settings.

The module utilized a series of repeating instructional units comprised three teaching

Components; an Information Point (IP), a Decision Point (DP), and a Video Decision Demonstration (VDD), occurring in sequence. IPs was typically short, two to four paragraph blocks of onscreen text which provided background information pertinent to an upcoming clinical decision. The majority of IPs in the module was immediately followed by an IP question, which was designed as a quick review of learning for the student before he/she proceeded to the actual clinical DP. DPs represented actual clinical decisions the student had to make before moving forward in the "care" of the patient. The module program provided immediate feedback to students regarding their selected response for both IP questions and DP questions. Finally, a short video clip (VDD) immediately followed the DP both to demonstrate the teaching point and visually reinforce learning.

Postgraduate training & specialist training:

a. United Kingdom (U.K): [16, 18]

There are a variety of postgraduate training programmes currently running in

the UK and Ireland. Depending on the chosen programme these can be undertaken via modular, distance learning, full- or part-time study, or attendance at day courses. Bristol University includes a course for dentists interested in improving knowledge and skills in special care dentistry. Each course combines a structured programme of around 80 hours of academic study with workplace activity. Its aim is to enable dentists to become confident in managing patients requiring special care and to provide an equitable dental service. It emphasizes the holistic approach to oral care, the importance of team working and effective communication.

Kings College London Dental Institute runs a two year Master of Science (MSc) programme in sedation and special care dentistry that provides academic, research and clinical elements. The latter are in-house as well community-based, through a number of close links with community and other dental services.

The Eastman Dental Institute, which runs an established MSc course in special care dentistry, has recently established modular Certificate and Diploma courses, providing two and three modules of accreditation, respectively, in special care dentistry.

Trinity College Dublin offers a taught doctorate in Dental Surgery – Special Care Dentistry (D.Dent.Ch.) which is three years full-time and five years part-time. In addition to general and oral/dental aspects of special care dentistry, clinical attachments with outside agencies and hands-on clinical training at the Dublin Dental School, the programme incorporates modules from the Developmental Disabilities Graduate Diploma course at University College Dublin and a significant research component.

Special care dentistry (SCD) is the newest UK dental specialty, only being

formally recognized by the General Dental Council (GDC) in October 2008. That step allowed the specialist advisory committee for special care dentistry to work with the London Deanery to design the first dedicated curriculum for this field which is taking place at the Dental Institute based at Guy's Hospital.

b. United States of America (U.S.A): [14, 16, 18]

United States has founded the American Board of Special Care Dentistry and training programmes in U.S is also started in many places like Kentucky, Chicago, Canada etc.

Robert wood Johnson foundation (RWJ): [14]

RWJ foundation in 1973 in U.S funded a 4 year demonstration grant that supported model educational programs in 11 dental schools. These programs were designed to

1. Heighten students' awareness of the dental problems of Patients with special health care needs (PSHCN).
2. Improve their technical skills in treating PSHCN and
3. Positively influence them to accept PSHCN in their practices.

U.S State practice examples for improving the oral health of individuals with special health care needs: [19]

1. Connecticut mandatory continuing education in Special Care Dentistry- Connecticut
2. The Nisonger Center Dental program- training of dental professional students to serve persons with disability- Ohio
3. Rose F Kennedy University center for excellence in developmental disabilities- special care dentistry fellowship program- Newyork
4. The DECOD (Dental education in care of persons with disabilities program) - Washington

c. Australia and New Zealand: [15]

It seems that Australia and New Zealand has been the first to accept Special Needs Dentistry as a specialty. Postgraduate degrees in Special Needs Dentistry are evolving at several Australian and New Zealand Dental Schools.

The Australian Society for Special Care in Dentistry (ASSCID) evolved over the last decade, and is currently being formalized as an affiliate professional organization of The Australian Dental Association. In Australia, the University of Adelaide has established a three-year Clinical Dentistry Doctoral Degree in Special Needs Dentistry, commenced from 2002. Representation has been made to the Australian Dental Council, State Dental Boards, and other interested parties to establish a specialty in Special Needs Dentistry

In New Zealand the University of Otago provides MDS in Hospital Dentistry. Arising from these postgraduate developments, the New Zealand Dental Council is looking closely at revising its existing specialty in Hospital Dentistry toward a specialty in Special Needs Dentistry.

Special care dentistry in Indian Scenario:

According to the census 2001, the total number of disabled in India was reported as 21 million which constitutes more than 2% of the total population. 75% of the persons with disabilities live in rural India. [20]

Collaborative efforts of All India Institute of medical sciences (AIIMS), New Delhi and WHO have come out with a publication regarding oral healthcare of disabled population which recommends several actions to be taken by the government and nongovernmental sector in this regard. Still a formal organization addressing the oral health problems of this segment of population has not been organized. [1]

It is high time that special care dentistry should evolve as a specialty in India at a post graduate level.

Suggestion for positive way forward for training Dentists for Special needs [14]

- Teaching in SCD embedded in the undergraduate curriculum
- The development of formal postgraduate training pathways in SCD
- Recognition of SCD as a specialty by the profession and other dental associations and organization.
- Creation of managed clinical networks of special care dentists and clearly defined pathways of care.
- Establishment of competency frameworks and training programmes for Dentists with Special interests (DwSIs) in SCD.

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