Provision of dental care for special care patients: the view of Irish dentists in the Republic of Ireland

Précis:
A greater focus on the promotion of, and education in, special care dentistry among primary dental care providers is required in Ireland.

Abstract:
Statement of problem: Part 2 of the Disability Act 2005 requires that all people with a disability are entitled to a needs assessment and, by implication, provision of identified care needs. This process started with children aged 0-6 in 2007 and will roll out to all people with disabilities by 2011. Oral health is part of that needs assessment but it may be that dentists are not in a position to provide that care, by virtue of a lack of education, training or facilities. The majority of dental care delivered would seem, from information gathered as part of this study, to be of an emergency nature. This study aimed to identify the shortfalls in service provision, and their potential causes, to inform what is hoped will be a positive directive on special care dentistry (SCD) in the proposed National Oral Health Strategy.

Purpose of study: To assess the provision of dental services for special care patients (SCPs) by dental practitioners in Ireland. To review the educational background of primary dental care providers in SCD.

Materials and methods: A postal and online questionnaire was sent to every third dentist on the Dental Register in Ireland. An analysis of data was performed using Statistical Programme for Social Sciences (SPSS).

Results: There were 782 questionnaires distributed. Of the 274 (35% response rate) dentists returning questionnaires, 236 were deemed suitable for inclusion; those dentists working in general practice or the Health Service Executive (HSE) only were included. Treatment provided by dental practitioners included emergency services (77%), extractions (72%) and restorative intervention (72%). Oral hygiene instruction for the carers of SCPs was provided by 52% of respondents. Of those surveyed, 25% claimed an awareness of the Disability Act 2005. Qualitative analysis of a definition of SCD and the perceived barriers to care were recorded. Additional fees for the treatment of SCPs were deemed necessary by 78% of respondents. An experience of training in SCD was recorded by 41%, and 65% of dentists expressed a willingness to partake in some/further training.

Conclusions: While the treatment of SCPs was reported by the majority of respondents (66%), the most common service provided was the management of dental emergencies. The need for a greater emphasis on preventive care was highlighted. Knowledge of the Disability Act 2005 was limited and responsible agencies need to increase awareness of the requirements for professional groups, like dentists, under the Act.

Key words: Access, disability, dental health.
Demographics of implant placement and complications of a patient subgroup in a dental hospital population

Précis
A significant number of complications occur following implant placement, but most of these are minor. Patients with implant-supported overdentures have more complications than those with fixed prostheses. Patients should be advised that ongoing maintenance of implant prostheses should be anticipated.

Abstract
Statement of problem: Little has been reported about the demographics of implant placement in the Irish population and the complications that occur. This is important in terms of service planning and providing patient information.

Purpose: The purpose of this study was to construct a database of patients who had implants placed in the Dublin Dental School & Hospital from 2000 to 2006. Also, we wanted to compare the complications that occurred in patients who had overdentures to those with a fixed prosthesis.

Methods: Hospital records were searched for all patients who had implants placed over a seven-year period and we recorded demographic information, as well as details of the implant site, implant type and restoration. Patients who had four or more implants placed for an implant-supported overdenture or fixed prosthesis were invited to attend for a clinical examination.

Results: A total of 1,111 implants were placed in 452 patients over the study period – half of the implants supported single crowns, while the other half supported mainly overdentures and full arch fixed prostheses, with few fixed partial dentures. The 40- to 60-year-olds had the greatest number of implants placed of any age group and most implants were placed in the anterior region. Patients with implant-supported overdentures recorded more complications (52%) compared to those with fixed prostheses (32%). The most common complications associated with both treatments were gingival inflammation and peri-implant mucositis. Overdentures additionally had a significant number of retentive clip fractures.

Conclusions: Implant-supported overdentures and fixed prostheses were both clinically successful. However, patients and clinicians should be aware that soft tissue and mechanical complications are common.