

A scoping review of the use of motivational interviewing in oral healthcare settings

Précis:

Motivational interviewing (MI) training contributes to practitioner confidence and professionalism. Improved dental outcomes in patients were noted. Further research is recommended into developing optimal MI training delivery.

Abstract:

Statement of the problem: Recently, attention has been given to the use of motivational interviewing (MI), a therapeutic approach that helps people to change, in the oral healthcare setting. MI can be used to evoke positive change in oral health practices using a patient-centred approach that supports dental practitioner-patient relationship building. This can include a broad focus on oral hygiene, nutrition and lifestyle behaviours, or can be specific to elements of oral healthcare such as periodontal treatment. However, the research literature on the efficacy of MI in this context is sparse.

Purpose of the study: The purpose of this study is to collate what is currently known on the use of MI in the oral healthcare setting.

Materials and methods: This comprehensive scoping review collated 50 published articles on this topic. Articles were scrutinised and analysed using thematic analysis.

Results: Findings indicate that there is a heterogeneous literature base on the use of MI in the oral healthcare setting of varying quality. However, evidence is building for positive outcomes where MI training has contributed to increased confidence, professionalism and relationship building in oral healthcare practitioners, and improved oral healthcare outcomes in patients across a range of oral health issues and oral healthcare prevention.

Conclusion: Further research is recommended into what constitutes optimal MI training delivery to ensure best practice and outcomes for patients and professionals.

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A necrotic orofacial lesion presenting in an immunocompromised patient in the UK: case review with features of noma

Précis: Noma in the 'developed world' is rare. An awareness of the condition is essential for clinicians, as oral hygiene and antibiotics can prevent severe morbidity.

Abstract: Noma is a gangrenous and destructive orofacial disease. It comes from the Greek word *nomein*, meaning 'to devour'. Caused by a rapidly spreading opportunistic infection, noma has a strong affiliation to extreme poverty and is infamously known as the 'face of poverty'. It is predominantly endemic to children between the ages of two and six who are malnourished, and is incited by disease. However, there is rare precedent of this disease emerging in adulthood in more economically developed countries, with noma-like lesions in the UK doubling since 2015. We report on a 90-year-old patient who initially presented to their general medical practitioner for a necrotic lip ulcer, which was originally thought to be a cold sore. The patient was later admitted to hospital due to reduced mobility and severe anaemia, with underlying features of sepsis, malnutrition, immunosuppression, oral necrosis and progressive ulceration over three weeks. Immediate treatment began following admission, including intravenous antibiotics, oral care and nutritional supplementation, before a definitive clinical diagnosis of noma was made after a biopsy, which ruled out malignancy. The rapid treatment response, albeit before a diagnosis was confirmed, allowed for the disease process to halt. This atypical presentation in a UK hospital highlights the need for periodic review of such lesions, so that current knowledge of their presentation and management is maintained.

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