

PREVENTIVE ORAL HEALTH CARE IN EARLY CHILDHOOD: KNOWLEDGE, CONFIDENCE, AND PRACTICES OF FAMILY PHYSICIANS AND PEDIATRICIANS

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The logo for the University of Florida College of Dentistry. It features the letters 'UF' in a large, bold, white serif font on the left. To the right of 'UF' is a vertical white line, followed by the text 'UNIVERSITY of FLORIDA' in a white serif font, with 'UNIVERSITY of' on the top line and 'FLORIDA' on the bottom line. Below this, the text 'College of Dentistry' is written in a smaller white serif font.

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Early Childhood Caries

- ▶ Affects children ages 1-6 years with rapid progression of cavities
- ▶ Advanced cases frequently require anesthesia or sedation to treat
- ▶ Advanced cases can cause systemic infection and even death
- ▶ ECC is totally preventable!



White Spots – Early ECC

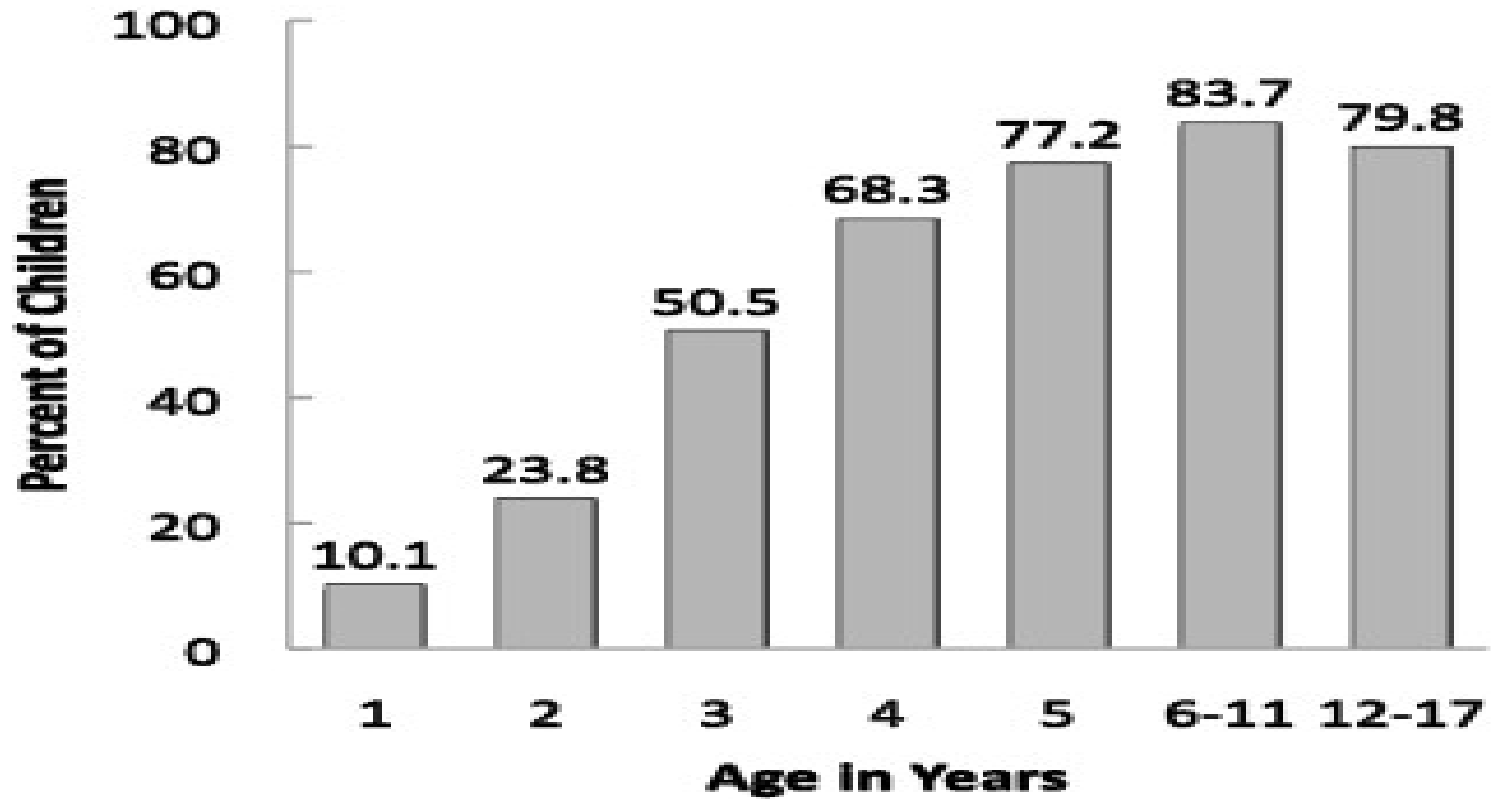


Moderate ECC



Advanced ECC

Percent of Children Receiving Preventive Dental Care in Past Year, By Age



Borrowed from Milgrom et al., Academic Pediatrics 2009;9(6):404-9

Relevant Florida data

--with a focus on Medicaid patients

- ▶ Only **10%** of Florida's 9,496 dentists participate in Medicaid
- ▶ Only **26%** of Florida Medicaid recipients enrolled at any point during the year receive dental services and only about **10%** of children under age 6 receive dental services.
- ▶ **75%** of physicians accept patients on public programs such as Medicaid and Children's Health Insurance Program

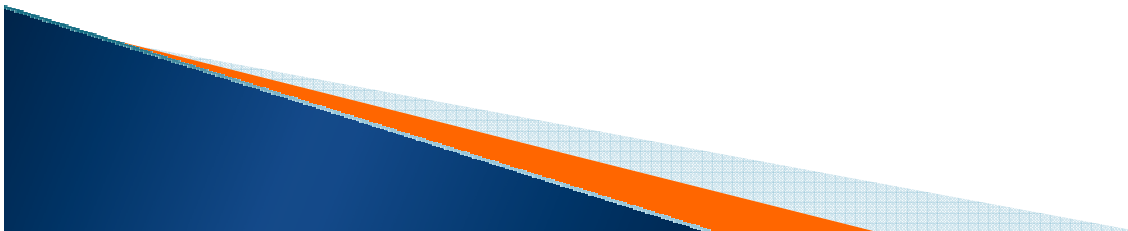
Role of Medical Providers in Preventive Dental Care

- ▶ 35 state Medicaid programs reimburse medical PCPs for providing preventive dental care.
- ▶ Florida implemented reimbursement in 2008 for children up to 3.5 years of age.
- ▶ The reimbursed procedure should include oral evaluation, risk assessment, parent counseling, FV application, and dentist referral.
- ▶ Training is not required for reimbursement, but is available through our program: **Gator Kids Healthy Smiles**

Objectives of the study

Objectives of our study:

1. Better understand the relationships between physicians' oral health training and their knowledge, confidence, and practices
2. Examine the differences between family physicians and pediatricians



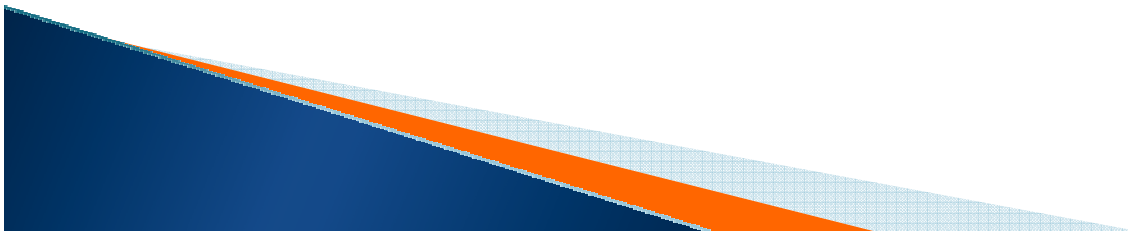
METHODS

- ▶ Members of the Florida Academy of Family Physicians and the Florida Pediatric Society completed self-administered questionnaire.
- ▶ Bivariate analyses were used to compare pediatricians' and family physicians' responses about their oral health knowledge, confidence, and practices.
- ▶ Multivariate regression analyses were used to examine the relationships between training, knowledge, confidence, and practices.



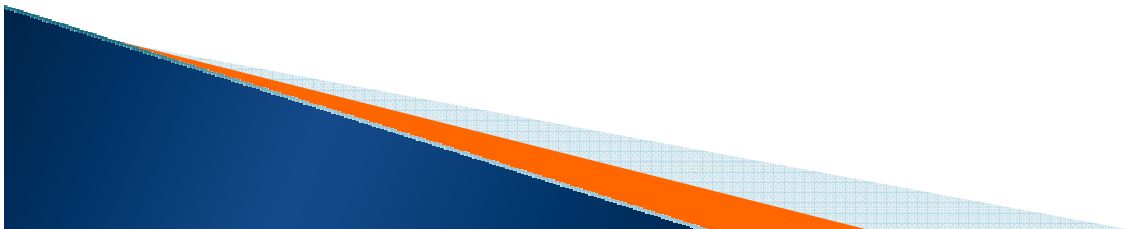
Major study areas of interest

- ▶ Physicians' oral health knowledge in two areas: fluoride-related and non-fluoride related
- ▶ Physicians' confidence in two areas:
 - Providing anticipatory guidance to parents
 - Performing pediatric oral health risk assessment and screening
- ▶ Frequency with which physicians perform recommended oral health services for patients < age 4 years



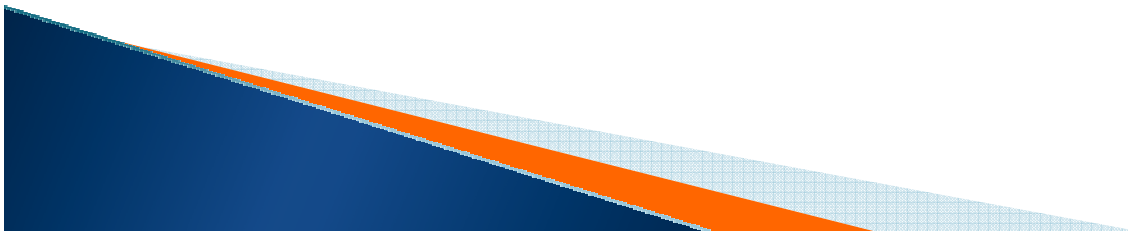
RESULTS

- ▶ Final sample size = 421 physicians
- ▶ Both groups reported having had prior training in oral health (79%).
- ▶ Both groups had similar levels of knowledge about non-fluoride related knowledge questions.
- ▶ Oral health training was significantly and positively associated with non-fluoride knowledge.
- ▶ Confidence had the strongest association with the frequency with which physicians performed recommended practices.



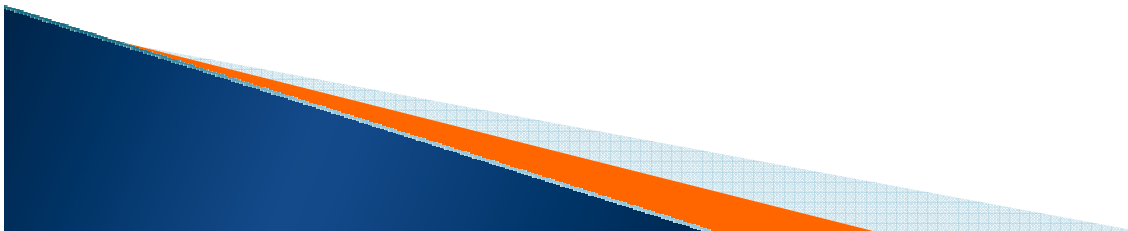
RESULTS continued

- ▶ Significant differences by physician type:
 - Family physicians were significantly less likely than pediatricians to answer fluoride-related knowledge questions correctly
 - Family physicians were less likely to report being confident
 - Pediatricians were more likely to perform recommended oral health practices



CONCLUSIONS

- ▶ Oral health training may play an important role in promoting physician confidence in performing recommended anticipatory guidance and oral health risk assessment and screening.
- ▶ Our findings of differences between family physicians and pediatricians suggest training programs should be tailored to the needs of each specialty.



Conflicts of Interest: The authors report no conflicts of interest.

Human Subjects: This study was approved by the UFHSC IRB

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