The Oral-Systemic Connection:
Integrating Oral Health and Medical Care
In the Community Health Center Setting

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“Doc, if I could just get these bad teeth out of my head, I know I would feel better.”
What is the Oral-Systemic Connection and why is it important?

- Oral health and overall health are intimately related/connected
- Our nation is faced with a growing problem of medical and dental healthcare disparities
- 2000 Surgeon General’s report: *Oral Health in America*
  - Informative report detailing the burden of oral disease on our country, the important message that oral health is essential to overall health, and the need for a national oral health plan to eliminate oral health disparities.
  - No less than a “silent epidemic of oral diseases is affecting our most vulnerable citizens—poor children, the elderly, and many members of racial and ethnic minority groups.”
- 2010 Surgeon General’s report: *National Call to Action To Promote Oral Health*
  - Truly a *call to action*—“...an invitation to expand plans, activities, and programs designed to promote oral health and prevent disease, especially to reduce the health disparities...” that affect certain groups of our society.
- Oral Health Provisions in the “Patient Protection and Affordable Care Act” signed into law by President Obama on March 23, 2010
What is the Oral-Systemic Connection and why is it important?

• General health risk factors also affect oral and craniofacial health (ex. tobacco use, poor diet)
• The mouth and face can serve as a mirror of health and disease (ex. HIV infection)
• The mouth can serve as a portal for infection (ex. endocarditis)
  – Several studies have shown that oral flora/infections are associated with higher morbidity and mortality, esp in certain patient populations (ex. neutropenic chemo pts, transplant patients)
  – Oral bacteria have potential for causing respiratory infections (ex. COPD pts, bacterial pneumonia)
What is the Oral-Systemic Connection and why is it important?

• Oral transmission of infections (ex. STDs)

• Periodontal disease—Diabetes connection
  – having diabetes increases incidence and progression of periodontal disease
  – Periodontal disease can affect glucose control in diabetic patients

• Oral infection—Cardiovascular disease (heart disease/stroke) connection

• Periodontal disease—Adverse pregnancy outcomes connection (ex. preterm labor, preterm rupture of membranes)

• Poor oral health has effects on quality of life and general well-being
The Oral-Systemic Connection
A Physician’s Perspective

• “Not my territory.” (Many medical doctors think the area between the lips and the tonsils is off limits)

• Lack of oral health education in medical school curriculum and physician residency training
    • “Identify learning objectives in oral and systemic health that will enhance each profession’s capacity to improve and maintain the oral and overall health of individuals and populations.”
    • The knowledge dentists need related to clinical medicine and the knowledge physicians need related to clinical dentistry are overlapping more and more
The Oral-Systemic Connection
What Makes the Community Health Center Special

• Affordable=Access
• Dispel fear of the dentist
• Ease of referral
• Consultation between medical and dental providers
• The patient-centered medical-home AND dental-home=Holistic approach to patient care
• Education/training site for future doctors/dentists
The Oral-Systemic Connection
Special Populations: The Medical Provider’s Role

• INFANTS & CHILDREN
  – EDUCATE
    • Incorporate oral health history into every well child examination
    • Fluoride, Fluoride, Fluoride!!!
    • Nutritional counseling and other anticipatory guidance
    • Dispel fear of the dentis
  – ASSESS
    • Incorporate oral health examination into every well child examination
    • Oral/dental trauma
  – ACCESS
    • Referral to a dental professional
    • First dental visit by age 12 months (in high-risk populations)
The Oral-Systemic Connection
Special Populations: The Medical Provider’s Role

- INFANTS & CHILDREN

**COMPONENTS OF ORAL HEALTH SUPERVISION**

Optimal oral health supervision for infants, children, and adolescents should contain the following components:

<table>
<thead>
<tr>
<th>Components of Oral Health Supervision</th>
<th>Provided by Oral Health Professionals</th>
<th>Provided by Other Health Professionals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family preparation</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Interview questions</td>
<td>✓</td>
<td>✓</td>
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<td>Risk assessment</td>
<td>✓</td>
<td>✓</td>
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<td>Screening, including recognizing and reporting of suspected child abuse/neglect</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Examination, including periodontal assessment and treatment for oral disease and injury</td>
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<td>Preventive procedures (application of dental sealants or topical fluoride varnishes, gels, or foams) as approved by state practice acts or regulations</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Anticipatory guidance</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Measurable outcomes</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Referrals, as needed</td>
<td>✓</td>
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</tbody>
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The Oral-Systemic Connection
Special Populations: The Medical Provider’s Role

- **PREGNANT WOMEN**
  - **EDUCATE**
    - Dispel fear: “It’s okay to see the dentist when you’re pregnant.”
    - Fluoride use (water, toothpaste)
    - Oral hygiene
    - Nutrition
    - Changes in teeth/gums
    - Link b/w poor oral health and adverse pregnancy outcomes
  - **ASSESS** oral health status
  - **ACCESS**
    - Referral to a dental professional
The Oral-Systemic Connection
Special Populations: The Medical Provider’s Role

- ADULTS (including the elderly)
  - EDUCATE
    - Oral hygiene (never too old to be reminded)
    - Link b/w poor oral health and systemic disease
    - Nutrition and it’s effect on oral health
    - Tobacco and it’s effect on oral health
    - Dispel fear of the dentist
  - ASSESS oral health status
    - Oral cancer screening
    - Recognizing dental caries
    - Recognizing periodontal disease
  - ACCESS
    - Referral to a dental professional
    - Encourage regular dental check-ups
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Case 1

2 ½ year old female presents with her father for evaluation of cold symptoms.
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Case 2

40 year old male asking about a painless nodule on his lower lip.
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Case 3

76 year old female presents with hemoptysis (coughing-up blood).
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Case 4

19 month old male brought in by his worried mother concerning low attachment of his upper lip frenulum.
The Oral-Systemic Connection

References


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