

Sixth Edition

Oral Medicine and Medically Complex Patients

EDITED BY

Peter B. Lockhart



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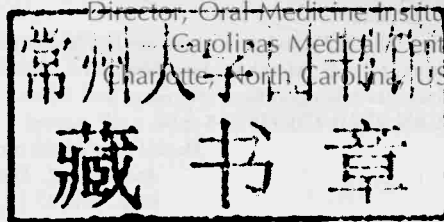


Oral Medicine and Medically Complex Patients

Sixth Edition

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Oral Medicine and Medically Complex Patients

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Website

This book is accompanied by a companion website:

www.wiley.com/go/lockhart/oralmedicine

The website includes:

- Downloadable tables
- Downloadable figures
- Downloadable charts

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P.B.L.

Introduction

There is ongoing concern about the availability and quality of dental care for people with complex medical and physical conditions, and those with nonsurgical problems of the maxillofacial region. Some of these patient populations have better access than others to quality clinical services, sources of funding, and/or advocacy groups. In addition to these barriers to care, there is a longstanding shortage of dentists trained to manage these problems. Dental students generally have minimal exposure to medically complex patients and clinical problems that define the specialty area of oral medicine, and there is a need for more medical-center–based residency programs in hospital dentistry and oral medicine for the pre- and postdoctoral trainees who are called upon to manage this growing population.

Special needs dentistry in the United States, often referred to as hospital dentistry, is practiced by a relatively small but dedicated group of clinicians. Some have postdoctoral training in medical-center–based residencies and many acquired these skills during their careers. Special needs patients have a broad range of medical, physical, and emotional conditions, and many of them require dental care in nontraditional settings of the emergency room and operating room, and at the bedside. Clinical space, specialized equipment, and trained support staff are also necessary elements for access to care for special needs patients. Larger hospitals may have fully staffed and equipped dental departments that provide care to hospitalized patients, as well as to ambulatory medically complex patients from the surrounding community. The majority of hospitals in the United States, however, offer neither inpatient or outpatient dental services, and these people must seek care from a wide variety of community-based medical and dental practitioners.

Formal, postdoctoral, hospital-based training programs for recent dental school graduates began in the United States in the 1930s with one-year, elective “rotating dental internships.” Over the following decades, these residencies gained popularity among dental students who recognized their lack of training, and they helped to create the demand for expansion in the number of these programs. General practice residencies (GPRs) became more uniformly structured and two-year programs evolved by the mid-1970s. Formal accreditation guidelines set minimal requirements

for the clinical and didactic components, and they are accredited by the Commission on Dental Accreditation.

The GPR should integrate dental residents into the medical center such that they have parity with their medical and surgical colleagues in training. They should focus on aspects of clinical and didactic training beyond that available in dental schools, to include exposure to difficult cases of infection, trauma, bleeding, and pain, as well as to a wide spectrum of nonsurgical problems of the maxillofacial region. Such complex dental care services require at least a basic understanding of physical risk assessment, general medicine, principles of anesthesia, and exposure to a variety of other disciplines and skills. Medically complex patients also require the integration and coordination of dental and medical care plans through interdisciplinary teamwork.

In the United States, there are two professional groups that have been in existence for more than 70 years to support dentists with a commitment to these patient populations. One is the Chicago-based Special Care Dentistry Organization (originally the American Association of Hospital Dentists), which, in addition to hospital dentistry, also represents the fields of geriatrics and people with disabilities. The other group is the American Academy of Oral Medicine (AAOM), which focuses on two major patient populations: medically complex patients and those with nonsurgical problems of the maxillofacial region.

These two clinical disciplines, medically complex patients and clinical oral medicine, are organized and practiced somewhat differently throughout the world. In some countries, medically complex patients and oral medicine are separate disciplines, and in others they are combined under one dental specialty, as is the case with the AAOM. Two publications from the Fifth World Workshop in Oral Medicine (WWOM V) addressed the current status of oral medicine clinical practice internationally.^{1,2} A survey was sent to oral medicine practitioners in 40 countries on six continents, and it revealed that there are significant differences in the definition of oral medicine practice throughout the world. Depending on the country, practitioners focus on a wide variety of clinical problems to include oral mucosal diseases, salivary gland dysfunction, oral manifestations of systemic diseases, and maxillofacial pain conditions.

The other WWOM V publication involved an international survey concerning postgraduate oral medicine training internationally.² Individual e-mails were sent to all known oral medicine faculty in oral medicine, who were asked to complete an online survey. Responses from 37 countries indicated that 22 of 37 had oral medicine as a distinct field of study. Although there was considerable diversity in oral medicine training programs, there were strong similarities in focus of these international programs.

¹ Stoopler ET, Shirlaw P, Arvind M, Lo Russo L, Bez C, De Rossi S, Garfunkel AA, Gibson J, Liu H, Liu Q, Thongprasom K, Wang Q, Greenberg MS, Brennan MT. An international survey of oral medicine practice: proceedings from the 5th world workshop in oral medicine. *Oral Dis.* 17 (Suppl. 1):99–104. 2011.

² Rogers H, Sollecito TP, Felix DH, Yepes JE, Williams M, D'Ambrosio JA, Hodgson TA, Prescott-Clements L, Wray D, Kerr AR. An international survey in postgraduate training in oral medicine. *Oral Dis.* 17 (Suppl. 1):95–98. 2011.

The challenge for the future is to define and approve an internationally accepted baseline training for oral medicine at both the dental school and postgraduate level and agreement as to the patient populations that make up this specialty. The further development of specialty examinations, credentialing, and international cooperation in the form of scientific meetings and research will translate into better care for all of these patient populations.

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Complex Patients

Oral Medicine and Medically
Complex Patients

It is the medical history and the physical examination that provide the information necessary for the diagnosis and management of the patient. The history and physical examination are the foundation of the diagnosis and management of the patient. The history and physical examination are the foundation of the diagnosis and management of the patient.

Oral Medicine and Medically
Complex Patients

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