Oral Health Care & Autism Spectrum Disorders: What's New & What's True

This project was generously funded by the Delta Dental of Arizona Foundation with a mission to improve the oral health of uninsured and underserved children and families in Arizona

Speakers

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Step One: Identify The Issues

 Oral healthcare is the most prevalent unmet healthcare need among children with and without special needs. (Newacheck et al. 2000)

Project Goals:

- The Delta Dental of Arizona Foundation provided grant funding to the Southwest Autism Research and Resource Center (SARRC).
- Grant's purpose:
 - Improve oral health outcomes for people with ASD's
 - Develop best practices and disseminate information to parents, dental professionals and autism care providers based on Applied Behavior Analysis (ABA) therapy.

Work Group

- Dental professionals
 AT Still Faculty
- Autism professionals
 - SARRC
- Parents
 - SARRC, ATSU
- Key community stakeholders
 - Delta Dental Foundation
 - Arizona Department of Developmental Disabilities

Barriers to care:

- Availability of good care
 - Dental professionals with skills & training to provide care
 - Financial: insurance/limited income
 - Access to care (location/identification of providers)
- Interdisciplinary care for support and services
- Patient/family willingness to participate in care
 - Perceived need for dental care
 - Cultural/language

Process

- Exhaustive literature search of dental, autism literature
- Identified best evidence based practices.
- Multiple meetings with all committee members
 - Insure mutually acceptable language
 - Each area of expertise reflected in guidelines
- Dental information guides were developed (in English and Spanish) specific to the needs of each cohort (Dental professionals, parents and caregivers, autism professionals)

Dental Care Information Guides



Taking our show on the road:

- Development of interprofessional CE courses
 - Dentists & Autism Providers
 - Parents

Why Provide Interprofessional Education?

- Individuals on the autism spectrum and their families have multi-faceted needs (e.g., medical, educational, financial)
- Professionals operating in "silos" often lose sight of these multi-faceted needs
- Caregivers who understand the importance of oral health are more likely to prioritize oral hygiene and dietary choices
- Dental professionals need people with expertise in ABA therapy to successfully treat a person with ASD

Collaboration-The Team Approach

- Oral health is an essential component of overall physical health and wellbeing
- Dentists need buy in from caregivers and other health professionals
- Begin effective oral health practices in infancy, or the earliest stages of diagnosis
- Most oral care takes place at home
- Oral health is NOT an option, its an essential!

Training Agenda

- Welcome
- Issues Related to Care
- Dental Project
 Overview
- Diagnostic Features & Treatment At Home & In the Dental Office

- What's in it for me as a provider?
- Activity
- Q & A Discussion

Applied Behavior Analysis

- Focuses on the principles that explain how learning takes place.
- Uses these techniques and principles to bring about meaningful and positive change in behavior.
- Positive reinforcement
 - When a behavior is followed by some sort of reward, the behavior is more likely to be repeated
- Can be used in structured situations
 - classroom
 - Dentist's office
 - "everyday" situations such as family dinnertime or the neighborhood playground

ABA

- Experimentally studied, validated and successful.
- Concentrates on breaking tasks into small, manageable components.
 - Sitting for "X" amount of minutes
 - Tolerate others touching his/her mouth (with rubber gloves)
 - Tolerate high volume/pitch sounds
- * Each skill may need to be taught and mastered individually.

Caries

- Rate is not a function of ASD.
- Can cause pain, poor health outcomes
- Educate parents to avoid giving sweet foods as behavioral rewards (suggest sugar-free substitutes)
- Poor oral hygiene since home care measures are exceedingly difficult for many children/ parents

Getting Started

- When parents call for an appointment:
- Ask if the parent would like a desensitization appointment to help the child become familiar with the office and staff.
- Ask the family to bring a preferred toy or item to occupy the child while they are waiting or during the exam/ procedure. They may also want to provide items to use as a reinforcer.
- Ask if the patient is nonverbal. If so, encourage the parent to bring the child's communication system/device to the appointment
- Some families may find it easier to have others support them during the office visit. Inform the family they can invite a family member, babysitter, or autism interventionist to join them at the dentist's office to help make the visit a success.
- Ask the parent for input on the best time for the appointment.

The Welcome Packet

- Pictures of the dental team.
- Pictures of the dental office (e.g. parking lot, entrance, reception area, operatories, toys/give-aways).
- Age appropriate materials (e.g. books, pamphlets) about visiting the dentist.
- Policies and procedures specific to treatment of patient's special needs.
- A form that reminds parents to develop a written list of questions that can be discussed at the time of the office visit.
- Dental emergency contact information.

TIPS

- Let patient sit in chair (in your chair, stool, etc.)
- Use a toothbrush to get patient to open for exam, (patients do better with familiar items)
- Do not touch or pat if patient has tactile issues
- Avoid sensory overload; use a quiet, private area
- Short appointments, esp. 1st visit
- Well planned appointment, be organized

Tips

- Use the same operatory
- Same toys, objects of interest
- Same appointment time
 - TV show (10 minutes to Wopner!)
- Don't make patient wait in waiting area a long time
- Music can be played if patient enjoys it

Oral Clinical Manifestations for Children with Classic Autism:

- Bruxism (20-25%)
- Non-nutritive chewing
- Tongue thrusting
- Self-injury (picking at gingival, biting lips) creating ulcerations
- Erosion (many parents report regurgitation, medical consult may be indicated)
- Many children have very limited dietary preferences (exclusively pureed foods, no fruits/vegetables, other)

Social Stories

- Describes relevant social cues and common responses in a specific situation. It explains what happens and why the situation occurs.
- A social story is designed to prepare an individual for an uncertain event.
- Provides a strategy to deal with an event effectively with a thought-out plan and guide.
- The story should be read to the patient several times before the first appointment.

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Information for Undentists

- Medication induced xerostomia
- Caries risk assessment
- Benefits of Fluoride varnish
 - Can be applied by non dental health professionals
- First visit by first birthday
- Include nutritionist on the team

Results

•We found significant differences in the quality of the dental visit

•When autism professionals, using ABA, provided home visits for the patient and his/her family

•When autism professionals accompanied patients/families to the dental visit

•When patients made several "happy visits" to the clinic prior to treatment

Pre and Post Tests

- Distributed to all participants in CE course
- Preliminary pilot data
 - Highly satisfied with training
 - Participants strongly agreed that interprofessional training was superior to traditional CE
 - Dental participants learned valuable information (ABA therapy)
 - ABA therapists learned valuable information (e.g.oral hygiene, caries etiology)

Looking Ahead

- Funding for more CE opportunities
- Large enough "N" on pre and post tests to validate results of training
 - Areas for improvement
- Further interprofessional education

A.T. Still University Hands-on Training for Dentists

- 11 yr. old male with ASD
- 1st dental visit

Dental Training



Practice at Home





Final