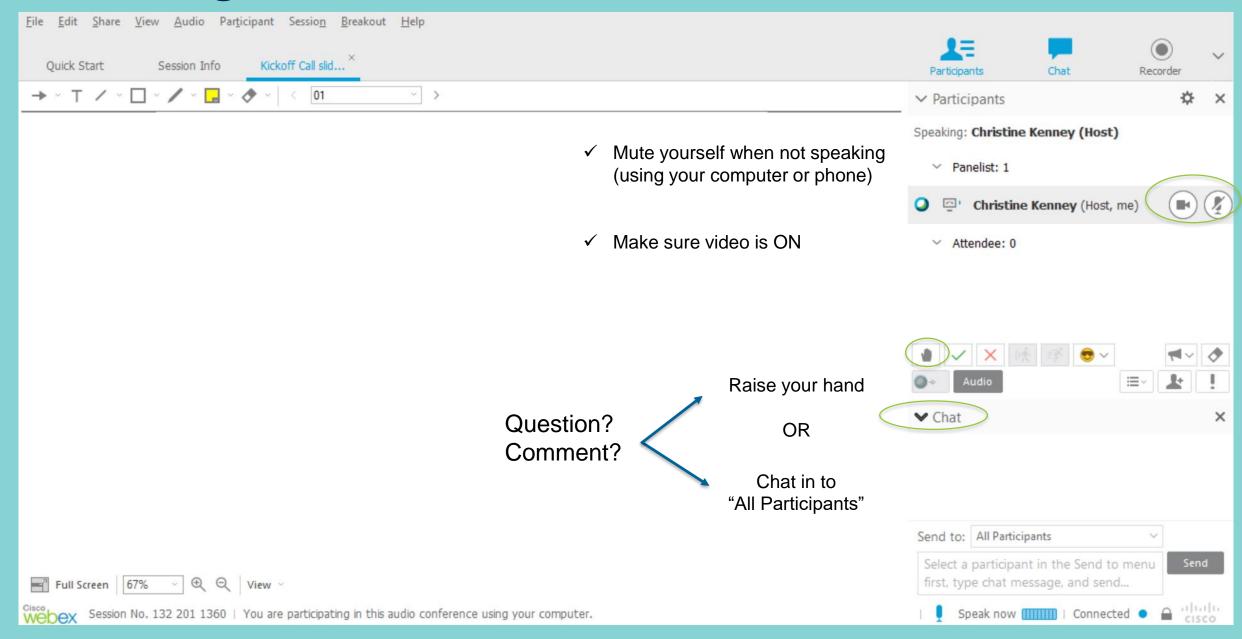
COVID-19 ORAL HEALTH RECOVERY AND TRANSFORMATION

COHRT Community Call

August 26th, 2020



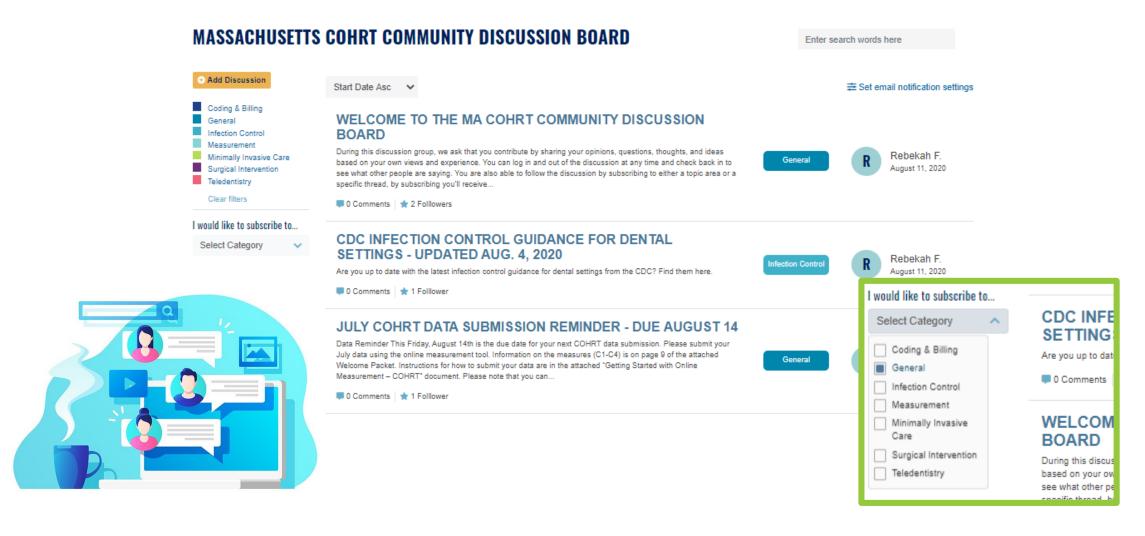
Interacting With Each Other



Today's Agenda

- Welcome
- Minimally Invasive Caries Management and Evidence-Based
 Care = The right combination
- Team Sharing: Lowell Community Health Center
- Discussion
- Next Steps

Introducing the Discussion Board!



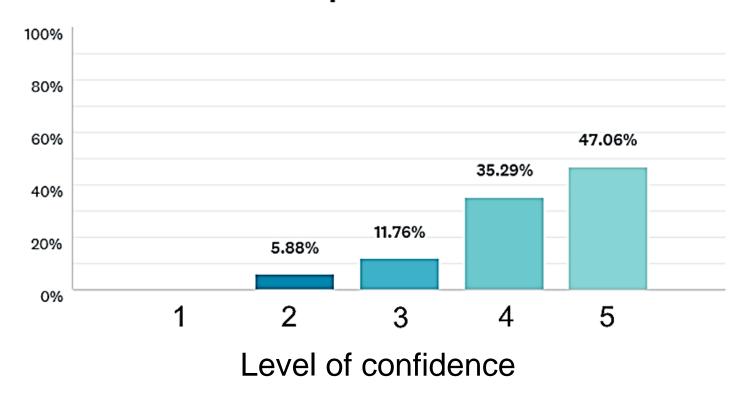
The Bigger Picture

Domains	Focus
Domain 1 Telehealth	Developing/expanding telehealth strategies for providing oral health services, given current infection control and regulatory restrictions
Domain 2 Minimally Invasive Care	Safely providing oral health care with non-aerosol procedures
Domain 3 Improved Surgical Intervention	Operate dental practices under emerging infection control standards

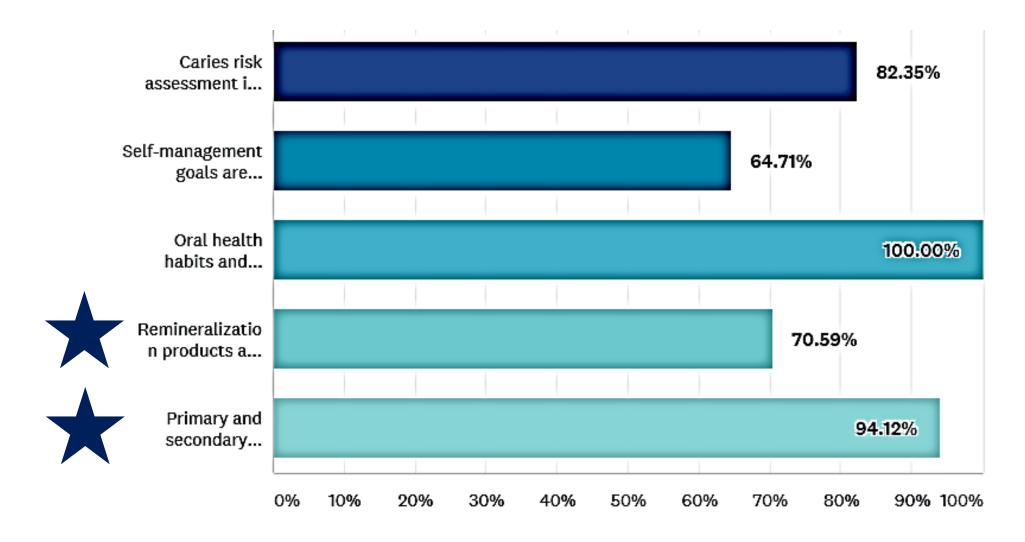


What we heard from you

Confidence in ability to use primary and secondary interventions (i.e Fluoride, sealants, SDF) to provide safe and affordable care to patients



You're Already Doing This!



Learning Objectives

Participants in this session will:

- 1. Discuss current evidence-based (EBD) standards regarding management of caries lesions
- 2. Discuss EBD options for prevention and management of caries lesions for primary and permanent teeth
- 3. Discuss peer experiences related to implementing minimally invasive procedures within the dental office during COVID-19

Disclosures



Margherita Fontana, DDS, PhD Clifford Nelson Endowed Professor of Dentistry School of Dentistry at the University of Michigan

Consultant of DentaQuest Partnership for Oral Health Advancement

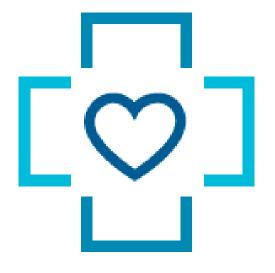


The DentaQuest Partnership for Oral Health Advancement is an ADA CERP Recognized Provider. This presentation has been planned and implemented in accordance with the standards of the ADA CERP.

Full disclosures available upon request

This webinar will be recorded.

The challenges of the pandemic....



Access to dental care is one of many ways in which COVID-19 has fundamentally altered and disrupted Americans' lives. In the early weeks of the pandemic, most dental practices essentially shut down by restricting services to only emergency dental care. Now, dental offices find themselves under significant stress as they seek to offer necessary care in a new, unpredictable environment.

.... and Opportunities for Change



A broad strategy that refocuses dentistry through pathway redesign could maintain and even improve access to care while minimizing transmission risk.

- Reduce aerosols
- Focus on preventing and arresting caries lesions (Best Evidence and Practice)
- Implement MID approaches (e.g., ART, SDF, FV, GI sealants, etc.)
- Telehealth (triage, engage, educate, prevent-arrest, monitor, etc.)

Advances in understanding of dental diseases, human behavior, diagnostics, biomaterials, clinical operative techniques and technologies have all contributed to our understanding of why MID, as a patient-centered, biological and economical paradigm IS the contemporary way to deliver dental care

JDR Centennial Series

A Century of Change towards Prevention and Minimal Intervention in Cariology





N.P.T. Innes¹, C.H. Chu², M. Fontana³, E.C.M. Lo², W.M. Thomson⁴, S. Uribe⁵, M. Heiland⁶, S. Jepsen⁷, and F. Schwendicke⁸

MID is not just the right approach during COVID but beyond!

	Past	Present	Future
Epidemiology	Rampant disease & early tooth loss Inequity – limited	Early/mild lesions (younger people), retreatments (adults) Inequity – social strata	Root caries & increased periodontitis in elderly Inequity – age based
Etiopathogenesis	Infectious disease	Ecological imbalance (dysbiosis)	Omics-based individual health and disease profiling
Diagnostic tools	Visual-tactile inspection, probing	2- & 3-D radiography, illumination & laser-assisted detection	Al-based detection
Treatment strategies	Forceps, burs, amalgam or crowns/dentures	Fluorides, adhesive dentistry, minimal-invasive operative approaches	Biomimetic remineralization, biofilm modulation, tissue engineering
Approach	Tissue excavation or excision, restoration or tooth removal, one-size-fits-all	Biofilm & remineralization control, stratified dentistry	Regeneration & personalized precision individualized care

Figure: Past, present and future aspects of prevention and minimal intervention in cariology

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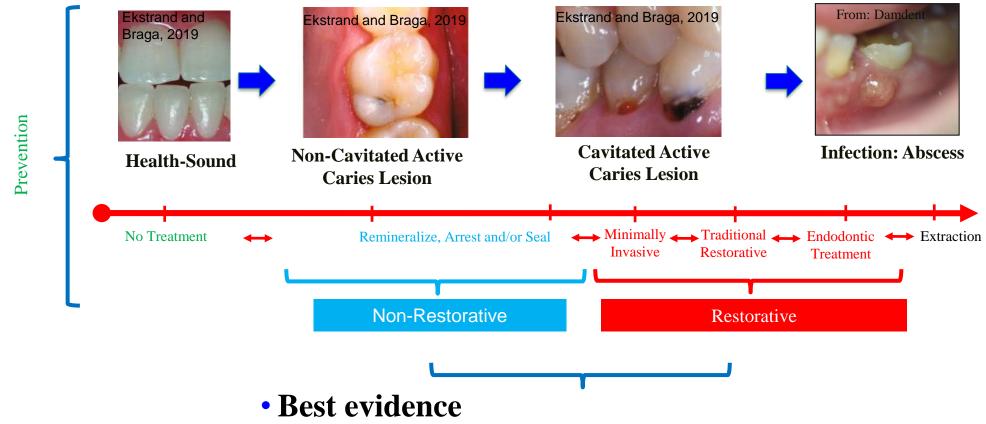


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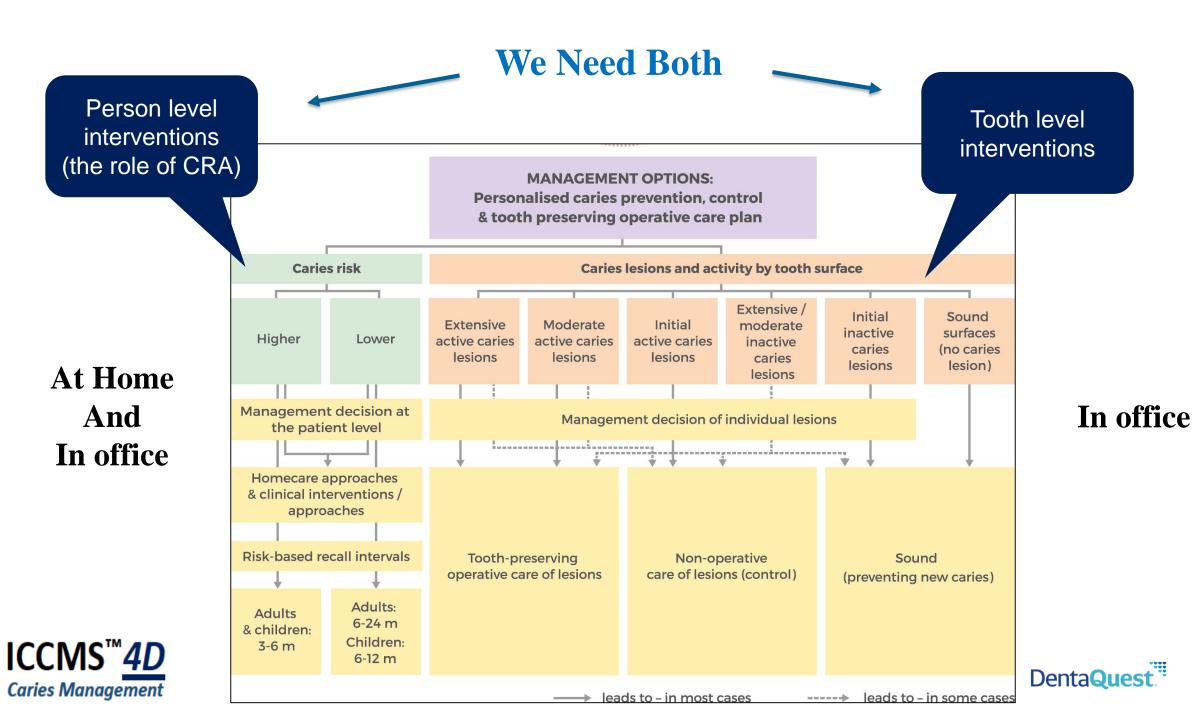
Guiding Principles for Modern Personalized Caries Management



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- Risk-Based; Person-Centered
- Focus on prevention and remineralization
- MID



Self Management Goals















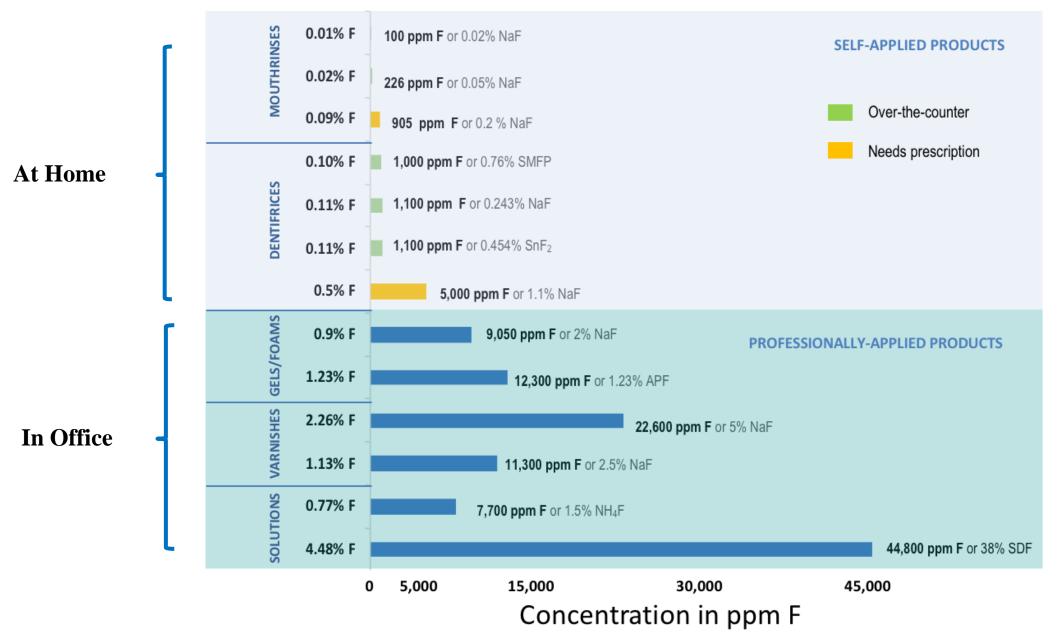




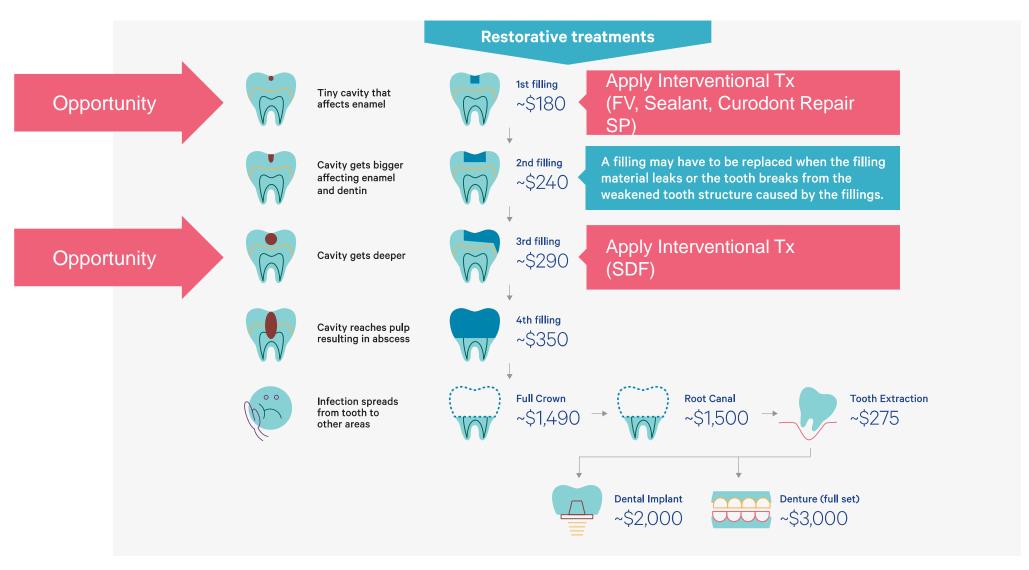


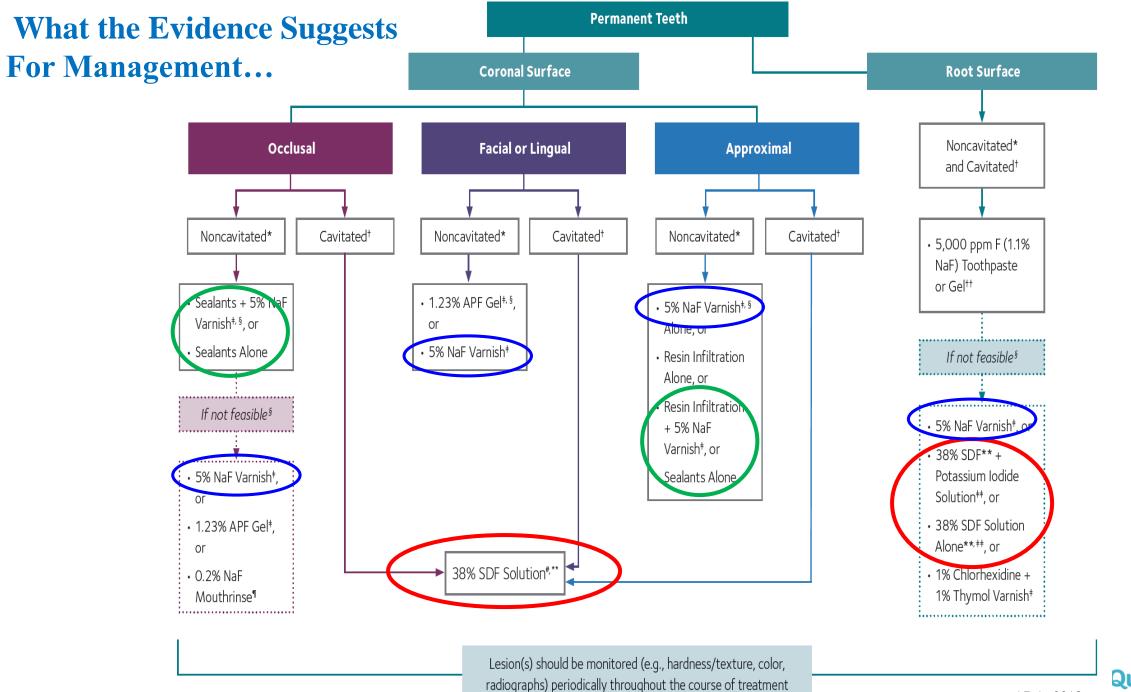




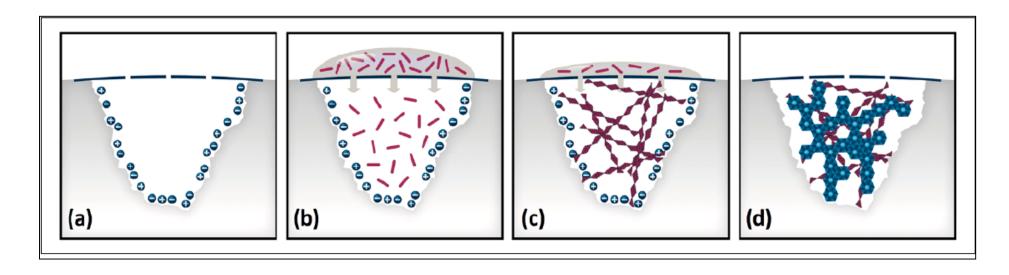


Interrupt the Downward Spiral of the Restorative Cycle





Newer Promising Strategies...A peptide that clinically can enhance remineralization

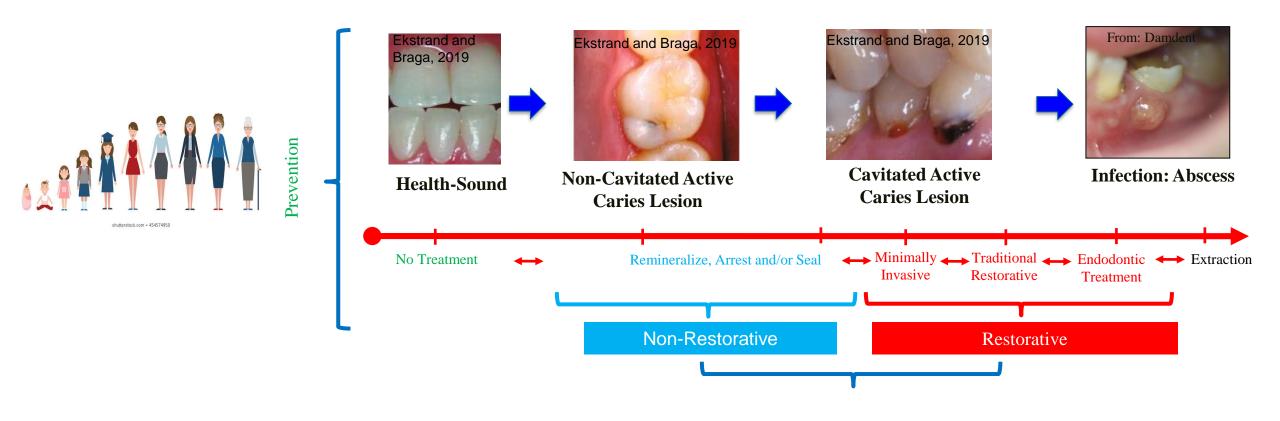


- RCT [test group (P11-4 + fluoride varnish) or control group (fluoride varnish alone)]
- Test group showed clinically and statistically significant improvement in all outcomes (laser fluorescence, activity, ICDAS, etc.) at 3 and 6 months

Alkilzy et al. 2018



Summary- This Is The Right Thing To Do Now And Beyond



- RISK: CRA Should Be Done Regularly on Every Patient (Goal: Decrease Risk!)
- EBD CARE: Use a Combination of At Home and In Office Strategies
- FOCUS ON PREVENTION: Use F and Sealants + Address Risk (Involve Patient)
- MANAGEMENT: Focus on MI care (Use FV, Sealants, SDF, etc.)

.... and a Modern Caries Management Approach can:



A broad strategy that refocuses dentistry through pathway redesign could maintain and even improve access to care while minimizing transmission risk.

- Reduce aerosols (thus improving safety, which will impact anxiety and stress)
- Be facilitated through Telehealth (triage, engage, educate, preventarrest, monitor, etc.)
- Improve health
- Improve patient satisfaction

Follow Up Resources

Practice Guidelines

Cover Story

Evidence-based clinical practice guideline on nonrestorative treatments for carious lesions

A report from the American Dental Association

JDR Centennial Series

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LOWELL COMMUNITY HEALTH CENTER



COVID-19 Impact to Care Delivery

- Longer appointment times
 - Maximize procedures / visit
- Changed to 4 day workweek schedule to preserve PPE
 - Slightly extended hours, no Saturdays
- Interprofessional collaboration challenged by lack of in-person interaction / curbside consults
 - TigerConnect, HIPAA compliant phone app for texting
 - Shared EHR (eCW)

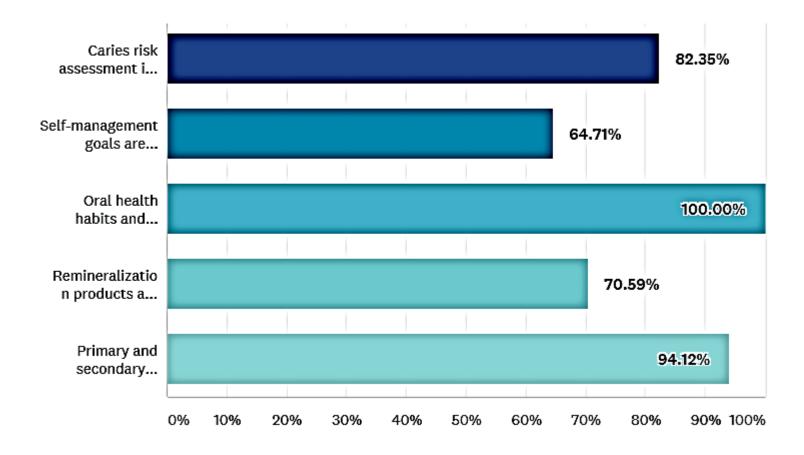


COVID-19 Impact to Care Delivery

- Silver Diamine Fluoride
- Prophy with hand instruments, not usually polishing
- Removed a/w syringe in non-aerosol rooms
- Sealants without a/w syringe
- Opportunities: pre-procedure rinse, rubber dams



Discussion



NEXT STEPS



September Faculty Office Hour: Minimally Invasive Procedures

In the next 2 weeks, once you've had a chance to test strategies, this office hour will be an opportunity to:

- Informally discuss remaining questions
- Discuss useful resources/materials
- Learn and share new ideas with peers and faculty



You will receive an email with the calendar invite

September 8, 12-1pm ET



COHRT Community Hub DentaQuestPartnership.org/cohrtcommunity-hub

FEATURED RESOURCES







Interim

DATA MEASUREMENT TOOL

Look to better analyze your practice's data to better understand your disease management or interprofessional efforts, improve patient experience and better understand outcomes of your practice?

Check out our customizable data measurement tool.

Learn More



COHRT EVENTS

Community Call #1 - Teledentistry

Learn More

Faculty Office Hours - July

Learn More •

Monthly Data Submission Due - June

Learn More •



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A link for the evaluation will appear when you exit WebEx

