

# Oral medicine: the importance of a team-based approach

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It is my pleasure as Guest Editor to welcome you to this Oral Medicine Themed Issue of the *British Dental Journal*. I would like to extend my gratitude to colleagues from the UK, Ireland and the United States who have contributed articles which we hope our readership will find informative. Oral medicine is the specialty of dentistry concerned primarily with the diagnosis and non-surgical management of adult and child patients with chronic, recurrent, and medically related disorders of the mouth, face and jaws.

Oral medicine specialists are typically based in dental hospitals and schools within the UK, often combining their clinical work with involvement in undergraduate and postgraduate education and research. Oral medicine interfaces between medicine and dentistry, and relies on multidisciplinary collaboration with various medical specialties, combining expertise to deliver the best outcomes for our patients.<sup>1</sup> Oral medicine specialists and consultants also work very closely with the other dental specialties (including oral and maxillofacial surgery, oral pathology, restorative dentistry and paediatric dentistry, in particular) with full involvement of the wider dental team. This includes not only dentists, but dental care professionals who have a substantial role to play in supporting patients in aspects such as behaviour change, risk factor management, optimising oral hygiene, and supporting patients as they negotiate the management of what can often be distressing and complex conditions. The importance of such team-based approaches to optimising patient care is highlighted in multiple papers within this issue.

Oral medicine units accept referrals from general dental and medical practitioners, regional referrals from general hospitals and

other medical specialties.<sup>2</sup> Indeed, it can be very reassuring to dental clinicians working in primary care to have access to oral medicine specialists within their local area as a source of support, and a referral option for those cases that present with an unusual or concerning oral lesion. Oral medicine, within the UK, remains a small specialty; however, it is experiencing a growth in demand driven by factors such as increasing medical complexity and patient expectations.

Within the oral medicine community, the expectation is that this demand will



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continue to increase and appropriate workforce planning is required to train the oral medicine physicians of the future to sustain the specialty and patients it serves. A significant proportion of disorders referred are chronic and may have a significant psychological and physical impact on patients and their quality of life.

In this series of papers, we have covered a range of conditions that provide an outline of typical oral medicine clinical practice and explore the relevance of this in children and in older patients. The range of papers included in this Special Issue parallels the evolution of the specialty over the last decade, with an increased focus on the non-surgical holistic medical management of patients presenting with a range of chronic facial pain and other sensory disorders of the maxillofacial complex. Management of these patients often draws on the expertise

of the oral medicine physician combining knowledge of dentistry with neurology, psychology, psychiatry and pain management.

We also considered it was important to touch upon the diagnostic challenges posed by oral potentially malignant conditions such as proliferative verrucous leukoplakia. General dental practitioners are also in a privileged position to be able to visualise exposed skin in good lighting and may encounter a range of skin lesions that may require further assessment; hence, we have included a relevant paper to cover this topic

as part of this Special Issue. The potential pitfalls around oral medicine presentations that are of relevance to general dental practitioners are also discussed.

When planning this Oral Medicine Themed Issue, we sought to ensure that the content was relevant both to general dental practitioners and also to clinicians based in secondary care. We hope to have delivered a diverse range of papers that highlight the range of contemporaneous oral medicine practice that will be of interest to the readership. ■

## References

1. The British & Irish Society for Oral Medicine. Homepage. Available at <https://bisom.org.uk/> (accessed April 2024).
2. NHS England. Clinical standard for oral medicine. Available at <https://www.england.nhs.uk/long-read/clinical-standards-for-oral-medicine> (accessed January 2024).

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