

# Summary of: The medical and dental attendance pattern of patients attending general dental practices in Warwickshire and their general health risk assessment

## FULL PAPER DETAILS

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**Background** The dental team could have an important role to play in general health risk assessment within primary and community healthcare. **Aims** To describe medical and dental attendance patterns, demographics and health profiles of patients routinely attending general dental practices in Warwickshire. To identify whether a subgroup attend dental practices regularly but attend medical practices infrequently and discuss whether preventive healthcare interventions delivered in general dental practice would be appropriate. **Methods** A self-completion questionnaire was administered to patients attending 16 dental practices in Warwickshire. **Results** Eight hundred and eleven completed questionnaires were returned (74% response). Seven hundred and eighty-nine (98%) respondents visited their dentist every one to two years or more frequently and of these a subgroup of 121 (15.3%) visited their general medical practice surgery or health centre less often than every two years. In the subgroup 9.5% reported high blood pressure, 17.6% currently smoked, 22% drank above recommended guidelines, 32.1% were overweight and 7.3% obese. **Discussion** The data suggest there may be a role for dental practitioners in identifying patients at risk of having undiagnosed or future general health problems and providing appropriate general health advice, screening or signposting the patient to relevant general healthcare facilities either within or external to the dental practice.

## EDITOR'S SUMMARY

I have touched before on the definition of a specialist being a person who learns more and more about less and less until he or she knows everything about nothing. It is ironic then, that in a profession which has spent so many years and involved so many acres of committee work in developing specialisms that we risk ending up having reduced the core role of the generalist practitioner to being a specialism in itself.

This paper cleverly brings together a host of ideas and approaches to health care which can be moderated by the dentist and other members of the dental team in terms of common approaches to the welfare of the individuals who are our patients. It encompasses the practical idea that as a practitioner to whom people come for a check-up, that is a preventive visit which is not prompted by a notion that they are ill or have a

condition that needs treatment, the GDP can utilise that precious attendance for a far wider range of observations and tests than merely a cursory look around the oral cavity.

The implications of this apparently common sense and very laudable approach to health surveillance are, however, far reaching in terms of organisation, training and remuneration. To what extent does the generalist tread on the toes of the specialist? How much additional training and awareness does the GDP need in order to make this role efficient and accurate? And how can such a service be made economically viable?

In the same way that the common risk factor approach to prevention makes a great deal of sense, although also requiring careful negotiation between experts (we suggest eating crisps instead of sweets – the dieticians cringe), so the screening for various conditions, such

as hypertension and diabetes, in dental practice will also need planned interdisciplinary cooperation. But this is not to say that it cannot happen, or that it will not happen. Consequently, this paper points a way towards an exciting possible future model.

The full paper can be accessed from the *BDJ* website ([www.bdj.co.uk](http://www.bdj.co.uk)), under 'Research' in the table of contents for Volume 212 issue 8.

Stephen Hancocks  
Editor-in-Chief

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**IN BRIEF**

- Compares patient attendance patterns at primary care medical and dental practices.
- There is a subgroup of patients who attend general dental practices more frequently than they do primary medical services.
- Dental teams are in strong position to identify patients at high risk of general medical health problems.
- Supports the development of a preventive general healthcare philosophy by the dental team in general dental practice.

**COMMENTARY**

The NHS Future Forum has stated that healthcare professionals should use every contact with an individual to maintain or improve their mental and physical health where possible, whatever their specialty.

Questions about diabetes, tobacco use and alcohol consumption are commonly included in dental patient medical history questionnaires. Asking health-related questions, however, does not necessarily mean that the dental team are acting on the information given by the patients.

This study investigated the potential for GPs to play a wider part in general aspects of their patients' healthcare. An appraisal of the appropriateness of delivering preventive healthcare advice in general dental practice was undertaken. A self-completion questionnaire administered to patients attending 16 dental practices in Warwickshire was used.

In the sample surveyed, 789 (98%) stated that they visited their dentist every one to two years or more frequently. Of these 121 (15.3%) stated that they visited their doctor or nurse at the general practice surgery or health centre less often than every two years. Therefore, there was a significant sub-group of the sample population (around 15%) who attended their dentist regularly but accessed primary medical care services infrequently. This sub-group in particular could potentially benefit from a dental environment in which they could be assessed with regard to their general health within defined parameters.

Some primary care trusts have com-

missioned services from dental practices which include interventions for smoking cessation and excess alcohol consumption. Dietary advice delivered by dental teams has traditionally had a narrow focus, not always consistent with general health advice. The paper postulates that it is possible such dietary advice may be more effective if it is integrated into general health advice.

The authors considered potential barriers to the delivery of general health interventions in general dental practice: insufficient funding, a consideration that the dentist's time could be better used, the need for training and lack of practitioner knowledge. The 2009 Adult Dental Health Survey stated that only 9% of adults sampled had been given smoking cessation advice by their GP in the last two years and hypothesised that this may have reflected a reluctance by the dental team to give this sort of advice.

The study suggests that there is a role for the dental team to play in identifying patients at risk from current or future general health problems. Having identified such at risk patients, appropriate general health advice, screening or signposting the patient to relevant general health care facilities could therefore be achieved. For this aspiration to become a reality there are significant implications for training at both undergraduate and postgraduate levels.

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**AUTHOR QUESTIONS AND ANSWERS****1. Why did you undertake this research?**

The government encourages dental teams to become actively involved in local health services. No study has compared the attendance patterns of patients at both primary care medical and dental practices. The Department of Health undertakes a quarterly patient survey which examines the accessibility of general dental and general medical services and the frequency of attendance, but not the relationship in attendance at both primary dental and medical care centres. The research was undertaken to examine the characteristics of patients routinely attending dental practices, their attendance at general medical practice and the potential risk of diabetes or other general health conditions.

**2. What would you like to do next in this area to follow on from this work?**

The findings suggest there is a subgroup of patients who attend their GP more frequently than they do primary medical services. We aim to develop educational material to encourage dental teams to be more aware of their patients' general health and the role of the dental team in active involvement in local health services. We would like to further examine ways of capturing patient medical health data through the development of software to allow the transfer of data electronically from the medical health questionnaire into the patients' computerised records. We aim to provide dentists with a computerised alert system which highlights those patients who are potentially at an increased health risk based on their medical history.