INVESTIGATION

There are more than 11 million people in the UK aged 65 or over. The number of people aged 65+ is projected to rise by 40.77% in the next 17 years to over 16 million, which means by 2040 almost one in four people in the UK will be 65 or older.

As the demographic of the population shifts towards people living for longer, so does the approach – on the ground and in strategy documents – towards the oral healthcare of the elderly. People living for longer and retaining their natural teeth present a very specific set of challenges for patients, policymakers and those at the sharp end of delivery.

The problem isn't confined to these shores. Across Europe more people are living longer, healthier lives. Here we take a look at one Belgian project trying to address some of these issues, and another project setting out on its journey to do the same in the UK.

GERODENT

Established in 2009 at the University of Ghent in Belgium, Gerodent is supported and delivered by a number of people, including Dr Barbara Janssens, and Professors Em Jacques Vanobbergen and Luc De Visschere.

Gerodent provides customised and comprehensive oral care for nursing home residents with a mobile dental team. The project is split up into four defined sections:

i) Oral healthcare team in nursing homes – this consists of nursing staff taking the role of oral care aides and oral health coordinators to improve the integration of oral care in daily general healthcare

ii) Education – The nursing staff are educated and trained by members of the mobile dental team to provide daily oral care and provide an oral healthcare record

iii) Guidelines - The Oral

'OUR GOAL IS TO IMPROVE THEIR QUALITY OF LIFE'

David Westgarth investigates oral healthcare for the elderly at home and abroad.

Healthcare Guideline for Older people in Long-term Care Institutions and the daily oral healthcare protocol derived from the guideline are applied

iv) Mobile dental team – They support the nursing staff and deliver preventive and curative oral healthcare to residents with difficulties in access to regular dental services.

The project operates in the Belgian region of Flanders, where there are 75,300 people in 783 nursing homes. In East and West Flanders, there are 33,818



people in 357 nursing homes, of which Gerodent operates in 70. The team work together with the geriatric department at University Hospital Ghent, local dentists and physicians and the team on the ground at the nursing home. Care is delivered through six dentists, three dental assistants and dental students.

As in the UK, there are access barriers in Belgium. However, treatment is very much limited to emergencies only, and there is a lack of preventive strategy, leading to poor oral health. Speaking at the most recent meeting of the European Platform for Better Oral Health, Dr Janssens highlighted a lack of policy and direction on oral health for frail older persons, t mistake given the ageing population, increased complexity of the dentition and co-morbidity.

'Gerodent aims to optimise the oral health of patients in a nursing home. Given how many nursing homes there are in the Flanders region it is crucial that we find a meaningful way to move towards preventive dental care within this environment. The experience we build up in the nursing homes could then serve in the future to tackle the oral health problems of home bound and care dependent elderly, which will be an even bigger challenge.

'We recognise that including oral health care in general daily care can provide a challenge for many nursing home staff, which is why Gerodent actively goes into nursing homes and works with all of the healthcare professionals involved with a person's care. By providing the team with training, standards to adhere to and an individual dental care plan for each individual plus support where it is needed, we aim to make a difference to their quality of life.'

So what about results? In the six years since Gerodent was established, the knowledge and attitude of the nursing staff has improved and the number of extractions and fillings have both decreased, with an increasing focus on prevention and infection control.

Dr Janssens added: 'The project is a sustainable one, given the public need. There are numerous strengths to what we are trying to achieve, and many positives for nursing homes, the care staff and the residents. We believe our care is innovative and can provide an exemplary role for similar projects both here in Belgium and across Europe.'

IOHOPI

One such project here in the UK is IOHOPI – Improving the Oral Health of Older Persons Initiative – launched in 2014 by Health Education Kent Surrey and Sussex (HEKSS). With the initial focus on care homes, the four main pillars of the project are similar in nature to those of Gerodent:

- Training resources
- Training delivery
- Sustainability
- Evaluation of research.

Like the situation faced in Flanders, there are a large number

of care homes in their target region. The team, led by Professor Stephen Lambert-Humble, estimates there are as many as 1,300 care homes in the region, with oral healthcare a challenging experience for many. They offer free training to care home staff and aim to engage with existing oral health promotion units and community dental services in the area.

Yasmin Allen, Dental Programme Director, explained: 'We know that CDS and existing oral health promotion teams are stretched, so it is very difficult for them on their own to implement initiatives in care homes. Likewise it is difficult for HEKSS to deliver the right advice and training without the support of care homes and those teams, so a joined up approach will pay dividends for everyone concerned. Working together is a different proposition. In many areas we can work with more care homes alongside other partners, which is really positive for us.

'Unlike Gerodent who can take equipment into care homes, we have to look at other alternatives. It does become a little bit more challenging, but the underlying point is the necessity for this group of people to receive regular dental care.

'If a resident can go out to the GP or the hairdresser they can go to the dentist too. We can't stress enough how important regular maintenance is – dental practice safer too. Gerodent take equipment into the homes, which is a great idea, but due to funding restrictions we have to look at other alternatives.'

So what can the UK learn from projects like Gerodent?

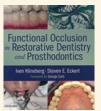
'In Europe there's so much going on; methods of sharing data and best practice isn't perhaps as sharp as it is here,' said Yasmin. 'We will continue to map out other programmes in the UK with the same aims as us and join forces and add value where possible.'

Like Gerodent the future challenges remain the same. People in the UK will be keeping their natural teeth for longer, as well as living longer, healthier lives. Add to that dental specific issues such as complex dentitions and these projects begin to look invaluable and ahead of their time. Yasmin believes it is inevitable that the training needs of the workforce will alter, and so will the skills needed to deliver to cope with the extra demand. Gerodent may be further along in the development process, but the IOHOPI team believe the same issues they face now will continue to arise.

'It's not as black and white as going into a care home and asking them to stop tea and cakes,' said Yasmin. 'It's a lovely social aspect of care homes, so we have to be very mindful of the impact such advice can have.

'Our goal is to improve their quality of life. We know there are a number of general health problems specific to the elderly that have been associated with poor oral health. If we can improve one, hopefully it will improve the other.'

BOOK REVIEW



FUNCTIONAL OCCLUSION IN RESTORATIVE DENTISTRY AND PROSTHODONTICS

Iven Klineberg and Steven E. Eckert Mosby Ltd. price £69.99 pp 288 ISBN 9780723438090

This book fills a gap in the literature available, by bringing together well-known biological theory, recent research and clinically relevant considerations for a 'functional occlusion' all-in-one text.

The scientific basis of the book is well evidenced throughout. There are four main sections: 1. Biological considerations, which covers background theory on the neural framework, occlusion & health, neuroplasticity and its implications for cognition, anatomy and pathophysiology; 2. Assessment of occlusal form, diagnostics for treatment planning and articulators; 3. Oral implant occlusion; and 4. Clinical practice and occlusion management.

The four main sections are further divided into 21 chapters, all easy to read and informative, with colour illustrations. The text is equally relevant for GDPs, undergraduates and postgraduates in all specialties of dentistry. I have no doubt it will be listed as a standard text in many universities and dental schools.

In particular, I enjoyed the sections on TMJ, as well as occlusion and oral implant restoration. I would certainly recommend this book as a very worthy addition to any practitioner's reference library.

J. CATO

SUCCESS FOR DENTAL ALCOHOL REDUCTION TRIAL

On 28 January 2016, the UCL Dental Public Health Group led by Professor Richard Watt celebrated the successful completion of a National Institute for Health Research (NIHR) funded study - the Dental Alcohol Reduction Trial (DART).

The successful study involved working with 12 dental practices across North London to assess the feasibility of GDPs providing brief alcohol advice to their patients. The Chief Dental Officer for England, Sara Hurley, gave a presentation about the importance of research to NHS dentistry and two of the practitioners that took part in the DART study, Shahab Mirjafari and Clare Grant, also shared their experiences of being involved in research. The evening closed with the presentation of research awards to each practice that took part in the DART study.

ADDENDUM

We would like to apologise for inaccurately reporting the details of the MBE awarded to Paul Liddiard in the June 2015 Birthday Honours (*BDJ* 2016; **220:** 95). Dr Liddiard was awarded the MBE for services to forensic and conventional dentistry in less-developed countries.

YOUR ROLE WITHIN PRIMARY DENTAL CARE

Zoe Allen, a dentist and PhD student at Plymouth University Peninsula Schools of Medicine and Dentistry, is researching dentists' perceptions of their professional roles within primary dental care. Zoe would like to invite dentists who work in general dental practice or community dental services to take part in this study.

To find out more, please visit https://www.plymouth.ac.uk/research/dentists-perceptions-of-their-clinical-roles.