

# “Special Care Dentistry (SCD) in Pakistan – directing the attention towards the need”

Opinion

Volume 3 Issue 2- 2023

## Author Details

Ayesha Hanif\*

Periodontology, Jinnah Sindh Medical University, Pakistan

## \*Corresponding author

Ayesha Hanif, BDS., MDS (Periodontology), MSc. (Clinical education), Senior Registrar- Periodontology – Jinnah Sindh Medical University, Karachi, Pakistan

## Article History

Received: September 22, 2023 Accepted: September 27, 2023 Published: September 29, 2023

## Opinion

The definition by the United Kingdom, Royal College of Surgeons Edinburgh (RCSed): “The specialty of dentistry concerned with the oral health care of patients with special needs for whatever reason, including those who are physically or mentally challenged.”

## Disability Prevalence

According to the fact sheet from the World Health Organization (WHO), more than 1 billion people worldwide experience disability which makes it up to 15% of the world’s population [1]. The number of individuals experiencing disability is increasing as chronic health issues rise in number and there is a pattern of increasing age of the population.

According to the 5th population and housing census in Pakistan, 2.38% of the population presented with disability. However, it was alarming to note that the 6th population and housing census in Pakistan, reported the statistics of disabled individuals drop down to 0.48% . which was largely an ignorant oversight, later acknowledged by PBS on the intervention of Supreme Court of Pakistan, that a number of disabilities were not made the part of the survey. In 2011, Pakistan Poverty Alleviation Fund (PPAF) conducted an independent survey [2]. and reported that eight out of every 100 Pakistanis are disabled to some degree or other; and one out of every 130 persons has some form of severe disability. These staggering statistics mandate integration of disabilities in mainstream avenues including health and education sector.

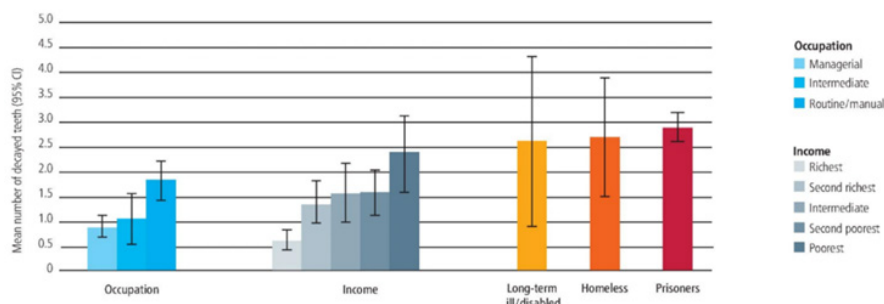
## Why Focus on SCD

With the advancements in medical care and technologies, the individuals with disabilities are living longer, increasing the likelihood that healthcare practitioners, including oral health professionals will have to treat these patients in medical/dental setups [3]. Medical and dental professionals and the institution of healthcare have a professional and

moral obligation to provide equal care to all members of the community. The same obligation is also emphasized upon in Pakistan’s code of ethics of practice for medical and dental practitioner’s regulations, 2011. The section on ethical standards of professional competence, care and conduct states that: “The medical or dental practitioner shall bear in mind the obligation of preserving life and will not discriminate on the basis of age, sex, gender, class, race, ethnicity, national origin, religion, sexual orientation, disability, health conditions, marital discord, domestic or parental statute, criminal record, or any other applicable bias as prescribed by law, and ensure that personal beliefs do not prejudice patient care”.

Despite recognition and acknowledgement for the disability needs, oral health access and treatment inequalities still exist vastly in the societies, particularly for the patients needing special care [4, 5]. Figure 1 [4] demonstrates that the disabled group has higher oral health problems even when compared to the poorest socio-economic cohort of the population. Dental graduates and practitioners cite lack of educational exposure in undergraduate and insufficient clinical exposure as the reasons for being less likely to treat patients with special needs [6]. Practitioners who cite their exposure to Special Care Dentistry, as well as their work experience with these patients, report more likelihood to treat this population when in practice [7]. The attitudes to diversity and confidence and willingness to provide care to this population improves only through exposure [8]. Therefore, it is evident that students need early and greater clinical exposure in this field [9]. Moreover, educational institutions should also offer continuing dental education (CDE) programs for practicing dentists and their auxiliaries, who did not receive any SCD training in their undergraduate curriculum, to promote improved skills and communication when treating a person with disability [8]. To provide the necessary training and education for the undergraduate, postgraduate students and general practitioners, SCD experts are required. SCD was officially accepted as a specialist field in 2006 by the General Dental Council (GDC). It is high time to explore the attention towards its need in the local context.





**Figure 1:** Understanding and tackling oral health inequalities in vulnerable adult populations: from the margins to the mainstream.

## References

- Bickenbach J (2011) The World Report on Disability. *Disability & Society* 26(5): 655-658.
- Chávez EM, Subar, PE, Miles J, Wong A, Labarre, EE, Glassman P (2011) Perceptions of predoctoral dental education and practice patterns in special care dentistry. *J Dent Educ* 75(6): 726-732.
- Darby M, Walsh M (2010) *Dental hygiene*. 4th (Edn.) St. Louis, Mo.: Saunders/Elsevier.
- Watt R, Venturrelli R, Daly B (2019) Understanding and tackling oral health inequalities in vulnerable adult populations: from the margins to the mainstream. *Br Dent J* 227: 49-54.
- Cumella S, Ransford N, Lyons J, Burnham H (2000) Needs for oral care among people with intellectual disability not in contact with Community Dental Services. *J Intellect Disabil Res* 44(1): 45-52.
- Mandasari M, Rahmayanti F, Derbi H, Wimardhani Y (2021) Special care dentistry perception among dentists in Jakarta: An online survey study. *Plos One* 16(4): e0249727.
- Alumran A, Almulhim L, Almulhim B, Bakodah S, Aldossary H, et al. (2018) Preparedness and willingness of dental care providers to treat patients with special needs. *Clin Cosmet Investig Dent* 10: 231-236.
- Faulks D, Freedman L, Thompson S, Sagheri D, Dougall A (2012) The value of education in special care dentistry as a means of reducing inequalities in oral health. *Eur J Dent Educ* 16(4): 195-201.
- Dolan T (2013) Professional education to meet the oral health needs of older adults and persons with disabilities. *Spec Care Dentist* 33(4): 190-197.

