JULY 2024
EDITION 31

EAST MIDLANDS LDN NEWSLETTER



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WELCOME

Welcome to the July edition of the LDN Newsletter for the East Midlands.

This month's edition focuses on treatment considerations for treating the homeless population and substance misuse. Whilst this population of patients may not be the regular cohort of patients we see in practice, alcohol and substance misuse in the population has increased over the past 10 years.

This edition also seeks to highlight the opportunities available in training, diversifying and mentoring as well as ensuring the dental profession's voice is heard.

There are so many ways of getting your voice heard; through the East Midlands DCP network and the water fluoridation consultation.

We all have a range of skill sets which we can use to diversify our careers and bring variety into our day to day work. If you want to find out more sign up to the diversifying your dental career sessions.

If you are looking to explore options in your career or need an objective sounding board to help you overcome challenges then sign up to be a mentee today through the East Midlands mentoring scheme. If you have skills and want to help your peers then sign up to be a mentor.

Whilst it seems like the summer is nearly over, the sunshine has just come out. We hope you are all able to make the most of the intermittent bursts of sunshine!

From the East Midlands LDN Chairs

What's inside this Issue: The homeless population & substance misuse

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Top tips and treatment considerations for treating the homeless population and substance misuse.

Maria Jackson StR in Special care dentistry CDS-CIC in Derbyshire

There is a lot of information about service design and oral disease risks for the homeless population and those who misuse substances, but practical tips on treating this cohort is very sparse. This patient cohort group is high risk across all oral diseases for a multitude of reasons; Difficulties accessing treatment, a chaotic lifestyle and low levels of self-care are key barriers to maintaining a healthy mouth.[1]

The Groundswell project 2017 [1] engaged with over 260 people experiencing homelessness and explored their oral health, lifestyle factors and access to dental services. 37% of this homeless population had alcohol misuse issues, 48% had current or past drug misuse issues and 78% were current smokers. The physical impacts of drugs and alcohol on oral health were often compounded by declining self-care. It highlighted the extent of health inequality experienced by homeless people.

KEY FINDINGS OF THE GROUNDSWELL PROJECT 2017 INCLUDE:

- 90% of participants had an issue with their mouth health since becoming homeless.
- Alcohol and drugs are commonly used to manage oral health issues. 27% of participants have used alcohol to help them deal with dental pain and 28% have used drugs.
- Mental ill-health and substance misuse issues had an impact on self-care and ability to make use of dental services.
- 15% of homeless people have pulled out their own teeth and 17% had lost teeth through violence.

PREVENTION

Each interaction with a patient from this cohort group is key to try and deliver preventative advice as they often attend very infrequently and are high risk for all oral diseases.

Cocaine use can lead to oral damage including palatal perforations and dental caries if rubbed onto gingiva.[2] Heroin use is associated with dental caries and loss of teeth.[1] Methadone often has a high sugar content which significantly increases the risk of dental caries, especially buccal caries.[3] There is a sugar free methadone available but this is still sticky and acidic.

- All patients should be prescribed high fluoride toothpaste/mouthwash if dentate.
- You should confirm if they have a toothbrush – if not there should be provision in the service to give free toothbrushes.
- Fluoride varnish should be applied every 3 months. If oral hygiene is not optimal, use a toothbrush or cotton wool roll to remove the excess plaque and then apply the varnish. You may not see this patient again and some fluoride is better than none.
- Make patients aware of sugar free methadone and advise them to swap to this if possible.
- Alcohol and prescribed or recreational drugs can cause patients to have a dry mouth. Providing advice regarding managing a dry mouth is important and try to encourage low sugar options for relief.
- Approach diet advice sensitively:
  - If a patient is rough sleeping, they likely have limited choice and a high calorie diet.
  - Listen to what they currently do and suggest small steps to move towards improving oral health.
  - Rigid diet advice risks alienating this population.

LOCAL ANAESTHETIC

Aside from the oral disease associated with substance misuse, which is well documented, there are several additional considerations regarding treatment that are needed.

It is well accepted that those who misuse drugs, in particular opioids, experience changes in their pain receptors and therefore may find it more difficult to achieve adequate anaesthesia[4]. You may need to give more local anaesthetic than expected to anaesthetise a tooth.

Similarly advising effective pain relief following extraction or procedure may be more difficult. Patients may indeed find that paracetamol or ibuprofen do not provide efficient pain relief. In this situation I would advise them to take what medication they take that works to help with a headache and other minor pain.

Cocaine, ecstasy, amphetamines and cannabis may interact with local anaesthetic that contains adrenaline and cause tachycardia and/or increase in blood pressure[5]. I would always advise patients who use these substances not to use prior to dental treatment where possible. If it is a first meeting and they have a dental emergency, or if they have used one of these substances that day, use local anaesthetic without adrenaline.

CONSENT

If patients have used a substance prior to attending their appointment, their ability to consent may be impaired. Often, we find patients are only using enough to be functional for the appointment and do have capacity to consent. It is important to follow the steps of the Mental Capacity Act 2005 and if you feel they are unable to consent for treatment that day due to alcohol or drug misuse then consider the following options:

- Has the patient presented with a situation where treatment that day would be in their best interest, for example, infection associated with an unrestorable tooth.
- Can the treatment be delayed until another appointment where they will not have impaired capacity.
- Can an alternative treatment be offered which can help them that day but allow for them to return when able to fully consent, for example, extirpating an unrestorable tooth and bringing back to discuss extraction.
    - In this option we must weigh up the risks and benefits of not carrying out the treatment as often attendance is very sporadic, and we want to try to treat a tooth permanently where possible.



DENTAL ANXIETY

With this patient cohort I would not underestimate the strong link to homelessness, drug and alcohol use and adverse childhood events (ACEs). This cohort is much more likely to have experienced ACEs which may have included domestic violence or sexual abuse. More than 8 in 10 (87%) of those with lived experience of homelessness said they had experienced at least one Adverse Childhood Experience (ACE).[6]

There are no prescribed guidelines for treating these patients and management strategies should be patient-centred; considering their need for control, their anxiety and any potential triggers.[7]
Establishing a positive rapport, being flexible and sharing control with patients is key to providing successful dental care.[8] This can be achieved by considering the following:

- Asking permission before starting
- Asking 'what can I do to help'?
- Agreeing on a stop signal
- Short bursts of treatment (10 seconds)
- Same day appointments
- Not lying the chair far back
- Allowing one foot on the floor
- Treating with the door open

TAKE HOME MESSAGE

Regardless of the rapport and trust built with the dentist, these patients may or may not reattend for follow-up/investigations/further treatment. It is important to maximise each contact in terms of prevention and getting them out of pain, within the realms of safety.

References:

1. Groundswell Report, Health Mouths report 2017
2. Cocaine and oral health H. S. Brand1, S. Gonggrijp2 & C. J. Blanksma3 British Dental Journal, 2008.
3. Nathwani NS, Gallagher JE (2008). Methadone: dental risks and preventive action. Dent Update, 35 (8): 542–4, 547–8.
4. Dental management of patients with substance use disorder, Clinical dentistry reviewed 2020
5. Substance abuse and conscious sedation: theoretical and practical considerations, Dental Update, 2019.
6. Voices of those with lived experiences of homelessness and adversity in Wales: Informing prevention and response, 2019
7. Dougall, A and Fiske, J. (2009). Surviving child sexual abuse: the relevance to dental practice.. Dental update, 35 (5), pp. 294 – 304.
8. VictimFocus. (2018).Supporting patients with histories of sexual abuse and trauma. A guide for dental professionals.



BSPD Annual Conference
Registration is now open for the BSPD Annual Scientific Conference 2024!

On behalf of the South Wales branch of the British Society of Paediatric Dentistry, we would like to invite you to join us in Cardiff for the BSPD Annual Scientific Conference 2024 on 12 & 13 September 2024, with the Teacher's Study Day taking place on 11 September 2024.
Visit the Conference website here

GOOD NEWS STORY

Lincolnshire Local Dental Committee & the Lincolnshire Talent Academy Aspiring Dentist Event

Sharon Cook Lincolnshire LDC Administrator

On the 17th July 2024, the Lincolnshire Local Dental Committee along with the Lincolnshire Talent Academy held an Aspiring Dentist evening at Lincoln County Hospital.The event was aimed at school students in years 10, 11, 12 and 13 who are interested in a career in dentistry.We had over 20 students attending from all over Lincolnshire. Dr Amelia Coulby, Dr Imogen Proctor and Dr Matt Barker, all from Lincs LDC gave talks on how to apply for dental school, Oral hygiene and hands on break out groups were held showing alginate impressions and how to do a composite filling.(photos attached)

The children were engaged and loved the hands on sessions, and the feedback for the evening was very positive.This event is held yearly and is very popular, notwithstanding it might help 'home grown' future dentists for our area.





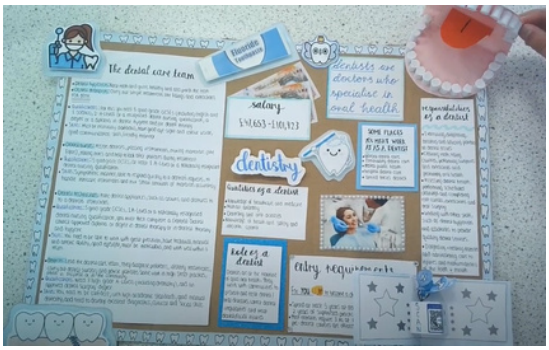




GOOD NEWS STORY

Regional winners in the Step into the NHS primary schools competition - the role of a dentist

Thousands of pupils from all over England sent in entries to the competition, which asked them to create a piece of artwork or writing that showcased the variety of roles in the NHS and challenge gender stereotyping in jobs. Congratulations to the regional winners across the Midlands, including:
Year 8 student Delisha from Avanti Fields School in Leicester created an interactive poster to advertise the role of dentist. It was beautifully presented and even mentioned other professions in the dental team. Judges said: "The 3D concept on a poster, and the QR code demonstrated immense creativity. There was outside the box thinking and clearly a lot of dedication!"



You can see a video of the entry on YouTube For further information and to see all the winners click here

GET INVOLVED - HAVE YOUR VOICE HEARD

FLUORIDATION CONSULTATION EXTENDED - NOW CLOSES 31ST JULY 2024

The government is seeking views on expanding community water fluoridation schemes in the north east with new arrangements or by varying existing arrangements.

CLICK HERE to find out more and have your say

The link to the main webpage is : https://www.gov.uk/government/consultations/community-water-fluoridation-expansion-in-the-north-east-of-england

The link to the online consultation document is:

https://consultations.dhsc.gov.uk/en/659c11ef3252bdbbae01cb07

The briefing can also be accessed on the NHS Futures site within Dentistry - Projects - Community Water Fluoridation

- **Any suggestions we make do not need to be accepted.**

Please do contact Jo Murphy, Manager of the Executive Office, Office of the Chief Dental Officer England if you have any questions regarding the national honours system.
Email: ENGLAND.CDOExecutive@nhs.net
SEE ATTACHMENTS FOR FURTHER DETAILS

East Midlands DCP Network Updates

GET IN TOUCH AND GET INVOLVED WITH THE EAST MIDLANDS DCP NETWORK BY:

Emailing: eastmidsdcpnetwork@gmail.com

Join the Whatsapp Group: CLICK HERE

Annual renewal for dental care professionals now open. Renew your registration by 31st July

CLICK HERE

TRAINING OPPORTUNITIES

Postgraduate Virtual Learning Environment (PGVLE) Registration Form

To access the PGVLE Please click here

There are also now online training courses available on the PGVLE relating to:

- **Peer Review Networks. This online course developed for dental teams across the Midlands is 1 hour CPD accredited. Log in here to access it**
- **Introduction to Dental Networks. This online course will help you to understand the configuration of Dentistry across the Midlands. Log in here to access it**
- **Dental Avatar – Communication Training. This simulated patient exercise is designed to test and improve communication skills. Log in here to access it**

If you haven't registered already - use the QR code on the left to register. This is for all members of the dental team.

DIVERSIFYING YOUR DENTAL CAREER

Do you feel like you would like to explore other options within dentistry to diversify your working week?
Would you like to hear from others with "portfolio careers" and hear about the paths they have taken?

The key to enjoying your career is understanding your passions and values and what drives you. This can be tricky though, having career coaching can be helpful to ask you the right questions.

If this seems like something that interests you NHS England WT&E are running free evening webinars in October – you will need to attend 2 session to gain your CPD

Session 1a – Dentists
Hear from 6 Dentists who have diversified their working week, whilst maintaining NHS primary care clinical practice. Including those working within education, research, leadership, commissioning and providing Tier 2 services.
Tuesday 2nd October 19.00-20.30
Visit accent to book



Session 1b – DCPs
This session you will hear from Dental Therapists and Dental Nurses who have taken different career paths. Including in education, leadership, working within commissioning, research and working for 111.
Tuesday 8th October 19.00-20.30
Visit accent to book

Session 2 – Whole Team
This session will be delivered by an experienced coach who will talk you through methods to help you uncover your passions and work towards finding direction in your career.
Tuesday 15th October 19.00-20.30
You will automatically be added to this session when you book session 1a or 1b.

OPPORTUNITIES

EAST MIDLANDS MENTORING SCHEME APPLICATIONS - CLOSES 1ST SEPTEMBER 2024

Open to dentists and all DCPs

Have you had formal mentoring training and would you like to support your peers by mentoring them? Then apply now to be a mentor and get paid to do it! Click here to apply!

Are you looking for a mentor to help you progress in your career or assist you in professional and personal development? Then apply now to be a mentee!
Click here to apply!

The Skill Mix/Mentoring webinar is now available for viewing on the PGVLE

Just to let you know that you can gain CPD by watching it and answering the summary questions.

Course: Skill Mix in General Dentistry (pgvle.co.uk)

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Local Dental Network Shropshire & Staffordshire

LDN

"Working together to improve oral health"