

# The Nondental Management of Pediatric Dental Patients

John A. Yagiela, DDS, PhD

In the February issue of this journal, coincident with that month's designation as National Children's Dental Health Month, Dr. James Crall highlighted demographic challenges we face in meeting the health needs of California children.<sup>1</sup> Among the statistics cited by Dr. Crall were the following:

- A total of 4.36 million low-income children live in California, representing one-sixth of the United States total;

- More than half of all California school-aged children have untreated decayed teeth, a prevalence more than twice the national average; and

- Preschool and elementary schoolchildren in California have higher rates of caries than other age groups.

Until such time as effective preventive measures against caries are uniformly available and practiced, primary care dentists in California will bear the burden of treating caries and its sequelae in these children.

Dr. Crall also commented on the availability of dental personnel in the state, their distribution, and their participation in the Medicaid (Denti-Cal) program. Besides such barriers to care as the maldistribution of dentists in the state, low Medicaid reimbursement rates for treatment, and a state deficit with potentially dire consequences for the public oral health care delivery system, many dentists harbor reservations

about treating children. These reservations are often linked, not with the necessary dental procedures to be performed, but with concerns pertaining to medical conditions children may have and behavioral challenges they may pose. The central theme for this month is "The Nondental Management of Pediatric Dental Patients." It is hoped that the information presented on this subject will help improve access to care by enabling more dentists to treat a wider variety of children more effectively and safely.

Three articles in this issue, by Dr. Arthur Friedlander and colleagues, discuss specific disorders that raise behavioral management issues for dentists and require specific adjustments to dental care. The first paper describes the medical management and dental implications of attention-deficit hyperactivity disorder. This condition, particularly common in males, is believed to be the most common neurobehavioral disorder among school-aged children. Dentists can provide the full range of dental services for these patients with appropriate consultation and recommendations detailed in this paper.

The second article by Friedlander and associates reviews the dental patient with autism. Autism is a neurobehavioral and cognitive disorder that presents significant challenges to both patient and caregivers, especially in social settings. With an apparently sustained increase in prevalence over the past two

decades, autism will continue to evolve as a growing challenge for dentists.

Fragile X, Rett, and Prader-Willi syndromes are described in the third article by Friedlander and colleagues collectively as the most common inherited genetic disorders leading to mental retardation. Dental management of these individuals requires a working knowledge of the medical and behavioral deficits they pose and how dental care can be modified to accommodate them.

Drs. Clarice Law and Stephen Blain review, in the fourth paper of this series, nonpharmacologic behavior management strategies that have proved useful in treating young children and older patients with varying degrees of developmental delay. Although "precooperative" children and the more severely retarded patients may require conscious sedation or general anesthesia for even minimally invasive procedures, a fundamental understanding of the determinants that influence patient behavior permits the dentist to select and use behavior management strategies appropriate for specific patients.

It is expected that subsequent issues of the *Journal* will further review medical issues surrounding the treatment of pediatric dental patients. **CDA**

**References** / 1. Crall JJ, California children and oral health: Trends and challenges. *J Calif Dent Assoc* 31:125-8, 2003.

**Contributing Editor** / John A. Yagiela, DDS, is professor and chair of diagnostic and surgical sciences, UCLA School of Dentistry, and professor of anesthesiology, David Geffen School of Medicine at UCLA.