

Promoting Oral Health Care for Pregnant Women

Comprehensive Perinatal Services Program
Statewide PSC Meeting
November 3, 2011



Cheryl H. Terpak, RDH, MS
MCAH Program
California Dept. of Public Health



Overview



- Importance of Oral Health
- Current CA Access Issues
- National and State Updates
- Possible Solutions to Increase Access
- Local Program Examples

Oral Health as Part of Prenatal Care



Improving the Oral Health of a Pregnant Woman

1. Prevents complications of dental diseases during pregnancy
2. Has the potential to decrease early childhood caries
3. May reduce preterm and low birth weight deliveries



Are Pregnant Women Getting Dental Care in CA?

- 34.5% of respondents visited a dentist or dental clinic during their pregnancy
- Most were non-Hispanic white, English speaking, educated beyond high school, and had insurance

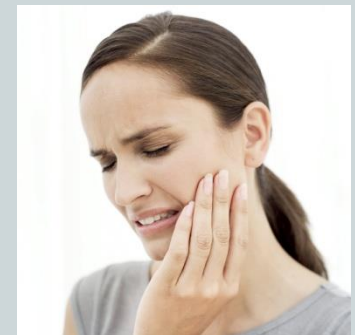


Marchi K et al. Who Does Not Receive Oral Health Care during Pregnancy and Why: Findings from a Population-based study in CA. Public Health Reports 2010;125(6)

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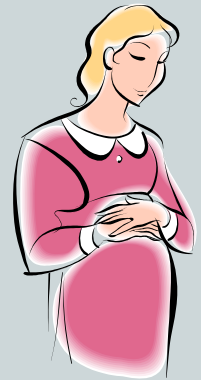
- 40% of women with college educations or in highest income category did *not* have a dental visit during pregnancy
- 62% of women reporting dental problems did *not* receive care during pregnancy
- 21% of women reporting a dental problem believed they didn't need to go to a dentist

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Main Reason for not Receiving Dental Care among all women sampled

- Did not perceive a need to go (38%)
- No insurance or it cost too much (21%)
- Didn't want to go or too busy (19%)
- Believed dental care was unsafe (14%)
- Provider advice against getting care (8%)

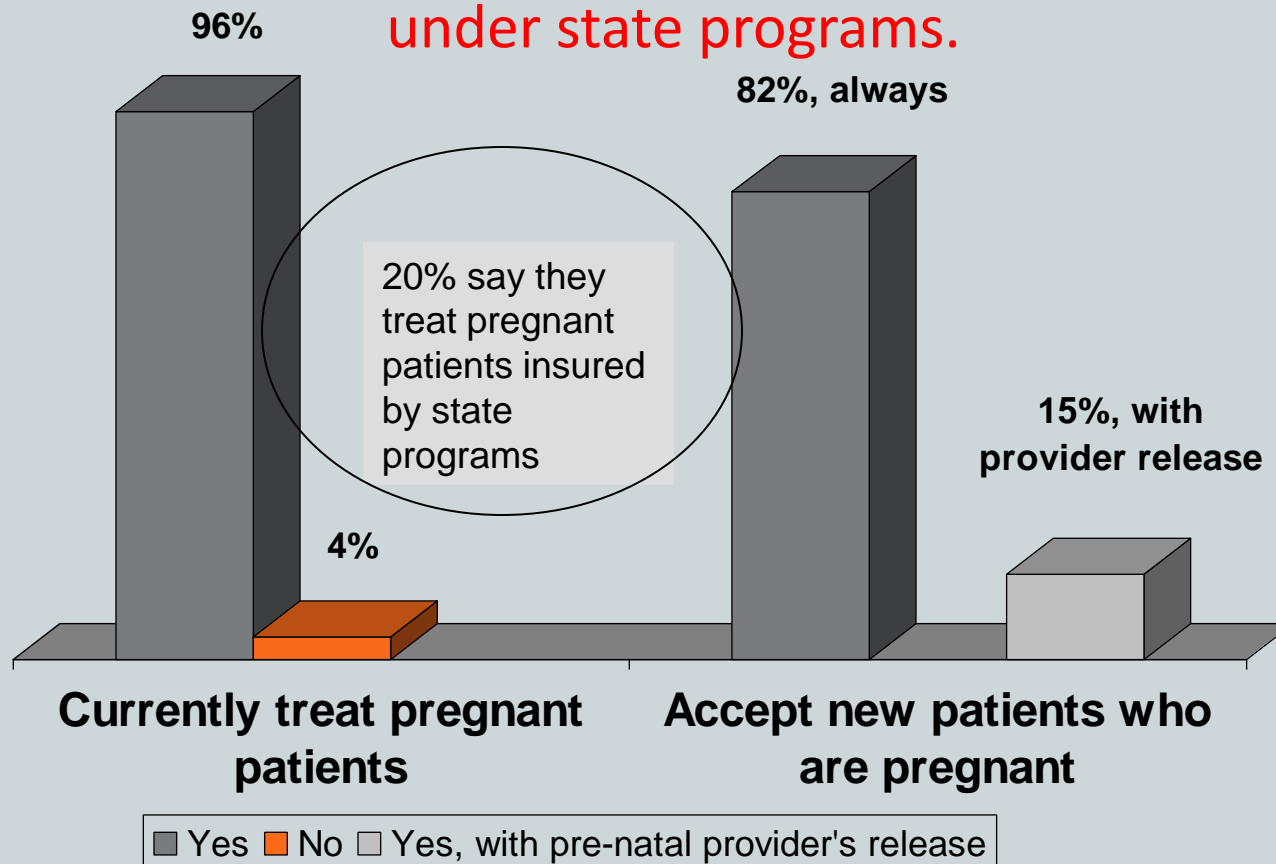


Reasons Dentists May Not Be Treating Pregnant Women

- Treatment often avoided and misunderstood by health professionals
- Fear of injuring either the woman or the fetus
- Failure of referral due to lack of training
- Pregnant women more likely to seek medical care/advice
- Lack of providers who will treat women with public insurance (Denti-Cal)



Pregnant Patient Population: Nearly all surveyed are currently treating pregnant patients, and accepting new patients who are pregnant. A small minority (15%) only accept new patients with a pre-natal provider's release. **Few treat pregnant patients under state programs.**



Why is it difficult to refer a client to a Medi-Cal dental provider?



24 yr. old Man Death Draws Headlines

Cincinnati – 8/31/11



Safety Concerns??

So how *do* we promote oral health care for pregnant women?



Money is an Issue!



Recent Access Reports

- Two IOM reports on access this year
 - Advancing Oral Health in American
 - Improving Access to Oral Health Care for Vulnerable and Underserved Populations
- Pew Children's Dental Campaign
- Children's Partnership – Dental Health Agenda
- ADA/CDA efforts

ADA Access to Dental Care Summit – March, 2009

“What are we going to do, in the short and the long term, both individually and collectively, to assure optimal oral health through prevention and treatment for underserved people?”



Safety Net “System”*

Clinical Services

- Charity and volunteer programs
- Dental schools
- Federally Qualified Health Centers
- Free clinics
- Hospital emergency departments
- Indian Health Service and tribal clinics
- Local health departments
- Long-term care and special needs services
- Non-dental providers (i.e., physicians, and school nurses)
- Private practice (Medicaid, CHIP, in-office pro bono care)
- Residency programs in hospitals, clinics and dental schools
- School-based programs

Non-Clinical

Support Services

- Federal Oral Health Programs (Head Start, WIC, HRSA workforce grants)
- Social services (case management and patient navigation)
- State Medicaid and CHIP
- State Oral Health Programs



*ADA Report – Breaking down Barriers to Oral Health for All Americans
August 2011

CDA's Access Report

Phased Strategies for Reducing the Barriers to Dental Care in California

- Establishing State Oral Health Leadership and Optimizing Existing Resources (Years 1-3)
- Focusing on Prevention and Early Intervention for Children (Years 3-5)
- Innovate the Dental Delivery System to Expand Capacity (Years 4-7)



Current Medicaid Focus



Solutions

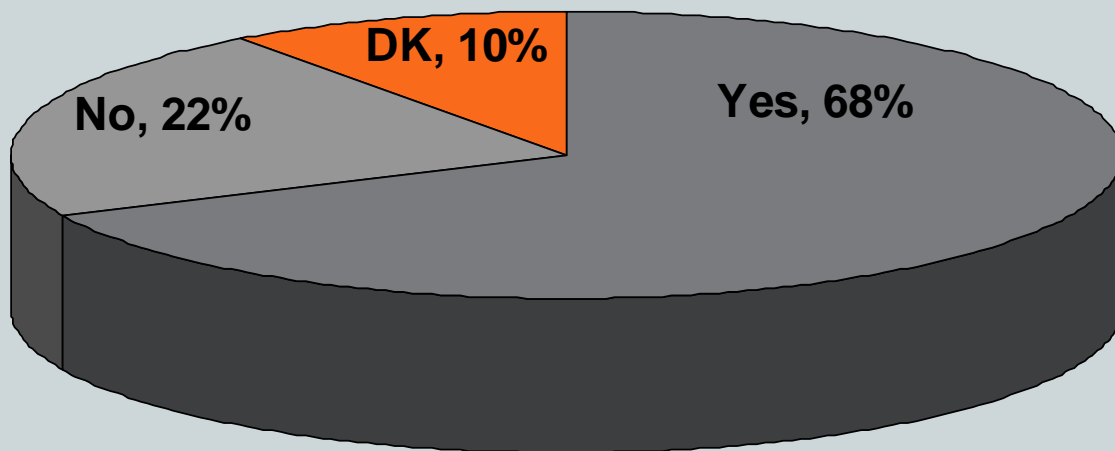


Integrate Oral Health Care into Overall Health Care



Usage of Prenatal Care Guidelines: Two-thirds of dentists say they currently use some type of guidelines when treating pregnant patients. Almost all would use such guidelines if they were available from a trusted source.

Do you currently utilize clinical guideline/s for pregnant women?



If guidelines on appropriate care for pregnant women were readily available from a trusted source, how likely would you be to use them?

| | |
|------------------|-----|
| Very Likely: | 90% |
| Somewhat Likely: | 7% |



Oral Health During Pregnancy and Early Childhood: Evidence-based Guidelines for Health Professionals



http://www.cdafoundation.org/learn/perinatal_oral_health

Improve Oral Health Literacy



Enhance the Delivery System within Dental Profession

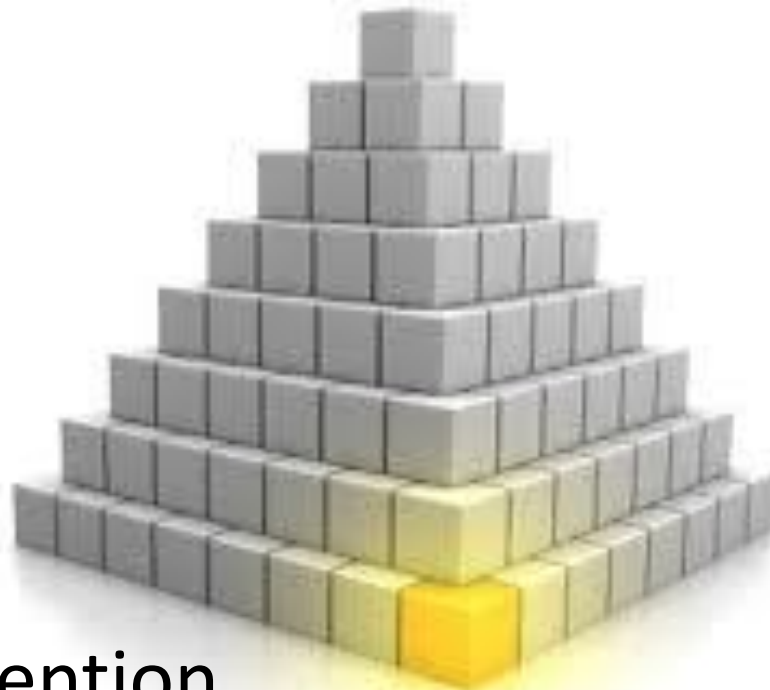


Health Collaborations

- CHDP
- WIC
- Head Start
- Home visitation
- Obesity and nutrition
- Diabetes and other chronic disease
- Substance abuse
- Childhood injury
- First 5 Commissions



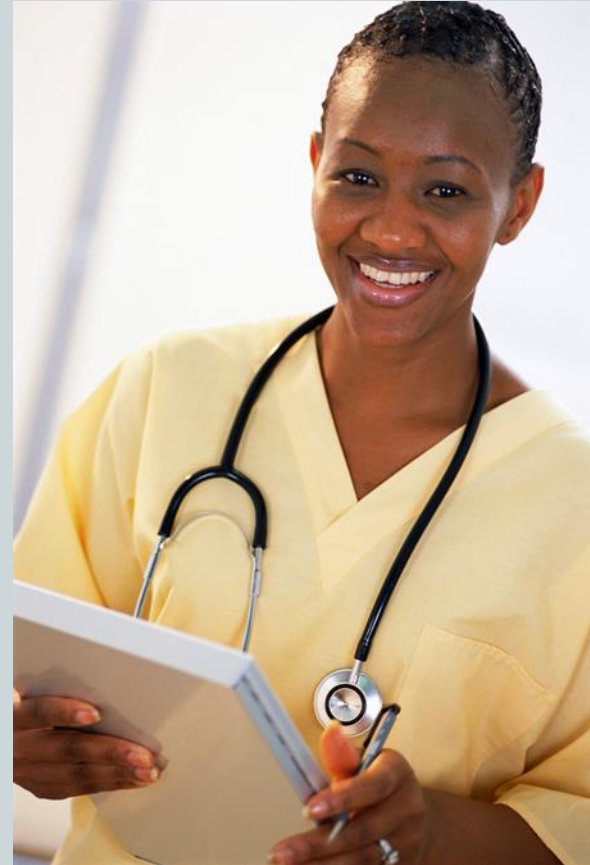
Client Education



Prevention

Ask Questions During Prenatal Exam

- Do you have bleeding gums, toothache, cavities, loose teeth or other problems in your mouth?
- Have you had a dental visit in the last 6 months?



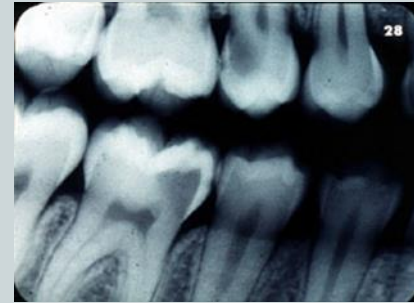
Guidelines for Health Care Professionals

- Advise that dental care is safe and effective during pregnancy
- Can be done any time during pregnancy with no additional risk as compared to not providing care
- Don't delay treatment



Safety Concerns in the Dental Office

- Diagnostic x-rays can be used during pregnancy



- Xylocaine with epinephrine can be used during pregnancy



Tips to Keep Mom Healthy

- Brush teeth 2 X day with fluoride toothpaste, especially before bedtime, and floss daily
- Chew xylitol gum 4 to 5 X day, especially after meals

<http://www.first5oralhealth.org/>

- Drink fluoridated water



Reduce Risk of Decay in Children

- Reduce the decay-causing microbes in the mouth
- Reduce the exposure of these microbes to fermentable carbohydrates and sugars
- Increase the decay resistance of the teeth



Client Brochures

Cavity Keep Away

Two Healthy Smiles



cdfoundation.org



mchoralhealth.org

Examples of Local Efforts

- **Alameda** – pilot project with Early Head Start targeting pregnant teens
- **Contra Costa** – distributes provider lists and prescription template to CPSP providers, created client brochure
- **Imperial/Plumas** – coordinator provides outreach and education
- **Siskiyou** – 100 OH kits through OB providers
- **Stanislaus** – public awareness campaign

Summary



- Continue to do the best we can with the resources we have
- Educate medical/dental providers
- Watch for and promote national oral health literacy campaign
- Create new ways to use workforce
- Collaborate and network with OH advocates
- Enhance client education to promote prevention

Thank You!

Cheryl Terpak, RDH, MS

(916) 552-8742

cheryl.terpak@cdph.ca.gov

