

Aims: Week 6

By the end of this webinar you should:

- 1) Be able to outline the concerns that patients may have regarding systemic and topical fluoride
- 2) Have an understanding of the clinical evidence AGAINST the use of fluoride.
- 3) Be confident in how to handle a situation where a patient has refused consent



Patient Care and Communication

Patient Care and Communication

GDC Standards for the Dental Team

Put patients interests first:

1.2 – You must treat every patient with dignity and respect at all times.

Communicate effectively with patients:

 2.1- You must communicate effectively with patients, listen to them, give them time to consider information and take their individual views and communication into account.



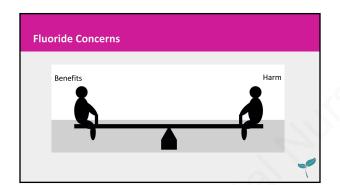
Patient Care and Communication	
Respect:	
"Feeling of admiration or deference toward a person, group, ideal, or indeed almost any entity or concept, as well as specific actions and conduct representative of that esteem"	
Dignity:	
"The state or quality of being worthy of honour or respect"	
1.4: Take a holistic and preventative approach to patient care which is appropriate to the individual patient.	
Posions Caro and Communication	
Patient Care and Communication	
Good Communication:	
Good communication means clear, unambiguous two way	~ ()
constructive exchange.	25
Requires :	\ \ -
Accepting people	<i>P</i>
Being non-judgemental Encouraging positive not negative feelings	
Working as a partnership	
Patient Care and Communication	
Benefits:	
Create opportunity for patient to ask questions and increase knowledge and understanding of health issues	
Ensure patient comfortable during appointments	
Reassure patient if have any concerns	
Gives us a chance to explain procedures, help patient have information to make	
informed decisions / give informed consent	

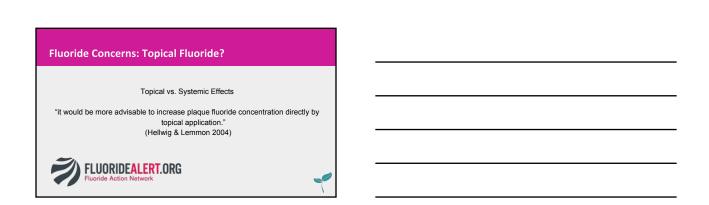


Patient Care and Communication Barriers to Good Communication: Social and Cultural Gaps Limited Receptiveness Negative Attitudes Limited Understanding Insufficient Emphasis Contradictory Messages



"The Dose Makes The Poison" A substance can produce the harmful effect associated with its toxic properties only if it reaches a susceptible biological system within the body in a high enough concentration.





Fluoride Concerns: Systemic Fluoride

- Dental Fluorosis (causes markings on enamel 'enamel defects')
- Mild acute fluoride overdose (vomiting, stomach pain, nausea)







Fluoride Concerns: Systemic Fluoride Changes to other tissues we cannot see?

Fluoride Concerns: Systemic Fluoride **Biochemical Mechanisms:** "A chemical mechanism involved in vital processes $\,\,$ occurring in living organisms. " $\,$ Dental Fluorosis may be an indicator of wider systemic damage. (Groth 1973; Colquhoun 1997).

Fluoride Concerns: Systemic Fluoride Skeletal fluorosis: " A bone disease caused by excessive accumulation of fluoride in the bones." Healthy adult kidneys excrete 50 to 60% of the fluoride ingested each day (Marier & Rose 1971) The fluoride concentration in bone steadily increases over a lifetime (National Research Centre 2006) Fluoride Concerns: Systemic Fluoride Man with skeletal fluorosis in Turkana, Kenya. Photo: protectorsystems.com Fluoride Concerns: Systemic Fluoride Fluoride and the Brain? "Apparent that Fluorides have the ability to interfere with the functions of the brain" (National Research Council 2006) Fluoride accumulates in the brain, alters mental behaviour in a manner consistent with a neurotoxic agent (Mullenix 1995)

One animal study found effects on brain at low doses

(Varner 1998)

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Fluoriae	Concerns: Syste	mic Fluoriae	
Fluoride and IQ?	?		
	Study	Fluoride Level found to possibly	
x	u (1994)	effect IQ 1.8-3.9ppm	
	ao (1996)	2.0ppm	
	u (2000)	3.15ppm	-
E	swar (2011)	2.45ppm	
D	ing (2011)	0.3-3.0ppm	
	Choi (2012)	1ppm	
			<u> </u>
Elmenidad	Camaanna, Cuata		
Fluoride	Concerns: Syste	mic Fluoride	
(Europuro to	Fluoridated water and a	attention deficit hyperactivity disorder prevalence	
		in the United States: an ecological association'	0.
	(M	1alin, Till, 2015)	
Conclusion:			
"Parents renor	ted higher rates of medi	ically-diagnosed ADHD in their children in states in	
which a greate		eceive fluoridated water from public water	
supplies."			
http://	'ehjournal.biomedcentra	al.com/articles/10.1186/s12940-015-0003-1	
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Flore 1.1	6	and a Physicial a	
Fluoride	Concerns: Syste	mic Fluoride	
Fluoride and	the Thyroid?		
"The thyroid		id patients was effectively reduced at just 2.3	
		/day of fluoride ion" etti, Jovet 1958)	
(1) manual and T			
Lowering T	riyrola Function in other	wise healthy individuals at 2.3ppm fluoride in water"	
	(Bar	chinskii 1985)	

Ethical? Informed Consent Informed Consent Subsets of population more vulnerable to fluorides toxicity No 'Safe Margin' People now receive fluoride from many other sources besides water.

Respect patient's views Explain risk of not using topical fluoride to patient Ensure patient aware of difference between topical and systemic fluoride

Emphasise to patient that they can change their mind in the future!!

Refusal of Consent: Topical Fluoride

· Record in notes

Refusal of Consent: Topical Fluoride Alternatives to Fluoride? No real alternatives at present Focus on Diet and Oral Hygiene Advice

Need to ensure good communication with patients Ensure we respect patients views and beliefs at all times Looked at barriers against good communication Looked at evidence against systemic fluoride use particularly water-fluoridation Looked at ethical issues related to water-fluoridation Looked at how to deal with refusal to consent for fluoride application

Week 1-6 webinars and quiz questions ROE Send ROE for marking before the course expires.