Primary Health Care Screenings and Interventions in the Dental Office¹

Dental providers can perform primary care screenings and interventions for activities and conditions that directly impact oral health and care delivery. Click on each link below to learn more about primary care procedures that can be conducted in the dental office.

- Smoking cessation and alcohol/substance abuse screening
- Facial lesions
- Undiagnosed diabetes
- Managing hypertension
- Sleep apnea
- Screening for osteoporosis and arthritic disorders
- Management of obesity
- Identifying abuse and neglect
- Early diagnosis and treatment of human immunodeficiency virus (HIV)

Smoking cessation and alcohol/substance abuse screening

Cigarette smoking is considered as a major risk factor for oral squamous cell carcinoma and periodontal disease. Smoking cessation programs in which dentists explain the importance of cessation for oral and dental health and general health should be part of regular dental care. Dentists who implement an effective smoking cessation program can expect to achieve quit rates up to 10–15% each year among their patients who smoke or use smokeless tobacco. Similarly, screening for alcohol and substance abuse/dependence can be done in the dental office as significant numbers of patients in the dental office suffer from alcohol and substance abuse/dependence. Substance abuse should be a consideration in all patients who present with dental trauma and those who present with frequent and vague complaints, multiple pain medication allergies, and regimens with multiple narcotic medications.²

Facial lesions

Dental practitioners should be keen observers of the status of patients who come for dental treatment. Any unusual or adverse findings should be questioned or pursued. Examples are dermatologic lesions on the face, head, and other exposed skin surfaces and various allergic reactions that may be encountered in the dental office. Premalignant and malignant lesions of the face, head, and neck are best treated early to avoid disfiguring surgery required for more advanced stages of disease. Examination of the patient's face and other skin surfaces can be achieved using the light in the dental operatory.

Undiagnosed diabetes

Diabetes is the only systemic disorder that has been definitively identified as a risk factor for periodontal disease. Potentially, screening of patients for suspected diabetes can be made by using chair-side tests for blood glucose or glycosylated hemoglobin.

Managing hypertension

Prevalence of hypertension is high, and dentists have been encouraged to participate in screening for hypertension for more than 30 years. According to a survey conducted among dental hygienists, a majority of the participants indicated that they rarely or never recorded blood pressure of their patients. Based on these findings, a recommendation was made for dental offices to modify their patient check-in procedures to include recording blood pressure.

Sleep apnea

The role of dentistry in sleep disorders is becoming more significant, especially in co-managing patients with simple snoring and mild to moderate obstructive sleep apnea. Sleep apnea is a problem that may be first recognized in the dental office. Dentists can be very involved in treating these patients. This care can involve mandibular advancement appliances and surgery to remove portions of the soft palate and uvula.

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Screening for osteoporosis and arthritic disorders

Both musculoskeletal disorders and diseases of the oral cavity are common and potentially serious problems among older persons. Several musculoskeletal diseases, including osteoporosis, Paget's disease, and arthritic disorders, may directly involve the oral cavity and contiguous structures. Considerable evidence indicates that the density of the mandibular bone is related to general bone loss. The gold standard for assessment of skeletal bone universal density is dual-energy X-ray absorptiometry, but dental radiographs, and in particular panoramic films, may be helpful in directing patients to seek additional follow-up. This assessment can be made from radiographs taken as part of regular dental care.

Management of obesity

Obesity is a serious public health challenge because obesity is a risk factor for many diseases, particularly type 2 diabetes and cardiovascular disease. Conversely, successful weight loss is associated with important health benefits. Oral health providers are experienced in delivering nutrition and carbohydrate intake messages. With appropriate training, they can actively participate in programs aimed at weight reduction.

Identifying abuse and neglect

Child abuse has serious physical and psychosocial consequences which adversely affect the health and overall well-being of a child. Among health professionals, dentists are probably in the most favorable position to recognize child abuse, with opportunities to observe and assess not only the physical and the psychological condition of the children, but also the family environment. Pediatric dentists can provide valuable information and assistance to physicians about oral and dental aspects of child abuse and neglect. Abuse and neglect can affect victims of all ages; physical signs of violence are relatively consistent through time and may present in similar fashion in victims of any age.³

Early diagnosis and treatment of human immunodeficiency virus

Early diagnosis and treatment of human immunodeficiency virus (HIV) not only improves individual outcomes, but can also reduce the spread of disease by increasing patient awareness and deceasing viral load. Screening for HIV has been shown to be feasible in the dental setting. Although HIV screening can readily be conducted in the dental setting, it is not yet clear if undiagnosed HIV is sufficiently prevalent in dental patients to warrant routine screening. For example, a screening was conducted on more than 3,000 previously-undiagnosed individuals presenting to a dental clinic and detected only 19 new cases of HIV.

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¹ Gambhir RS. Primary care in dentistry - An untapped potential. J Family Med Prim Care [serial online] 2015 [cited 2016 Mar 21];4:13-8. Available from: http://www.jfmpc.com/text.asp?2015/4/1/13/152239

² Bullock K. Dental Care of Patients with Substance Abuse. Dent Clin North Am. 1999 Jul;43(3):513-26.

³ Mouden LD. The Dental Team's Role in Identifying and Preventing Family Violence. Crest® Oral-B® at dentalcare.com Continuing Education Course. September 30, 2013. Accessed March 28, 2016. Available from: http://www.dentalcare.com/media/en-US/education/ce432/ce432.pdf.