



The role of the dental team during the COVID-19 pandemic

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In these difficult times, it is important that we utilise the skillsets of the whole dental team to treat patients holistically, says **Zahra Yasen**.¹

P rimary care dental teams are uniquely positioned compared to other professional groups. We see patients from all demographics on a routine basis, and in many cases we are in regular

contact with them throughout a large period of their lives. We keep track of their medical history, general health, social circumstances, and their treatment needs. We support and care for them during their times of anxiety, pain and fear. Many of us have spent years fostering effective relationships with our patients based on compassion and trust, which is reinforced by the frequency of our contact.¹

On 25 March 2020, a letter from the Chief Dental Officer instructed that 'all routine, non-urgent dental care including orthodontics should be stopped and deferred until advised otherwise'.² Our routine dental appointments were brought to a halt, with diaries cleared in favour of triage, remote advice and referral to urgent care centres. With the unprecedented pressures applied

to our NHS by the COVID-19 pandemic, redeployment of healthcare staff including the dental team was deemed necessary to cope with the shortfalls in the workforce.² The experiences of members of the dental team during redeployment have been documented in multiple articles^{3,4,5,6} with an increased recognition of our skills that extend beyond dentistry. Our knowledge of physiology and general health, our communication, history taking, clinical skills and general patient management have all allowed us to contribute positively to the general medical workforce.²

Psycho-social impacts on patients

Since dental practices resumed activity, and a drive towards a return to normality has begun, we are seeing the extent of the negative impacts of the COVID-19

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pandemic on our society's health and wellbeing. Its psycho-social impact on patients has led to an increase in patients presenting with conditions such as bruxism, temporomandibular joint dysfunction, and other orofacial pain conditions.^{7,8} The COVID-19 virus has also been linked to oral manifestations including ulceration, candidal lesions and erythroplakia.⁹ Often these patients present at the dental practice, anxious and struggling to manage their symptoms. Stress surrounding these conditions can often aggravate symptoms, and our role in diagnosis and patient reassurance is a pivotal step towards management of their conditions.^{10,11}

Lifestyle and nutritional choices

Many patients also blame the stress of the pandemic on poor lifestyle habits. Smoking amongst 18- to 34-year-olds increased by 25% during the first lockdown, and a general increase in consumption of alcohol has been reported,¹² both of which are known risk factors for development of oral lesions and cancers.¹³ An increased frequency of snacking on foods with high fat, salt and sugar content was also seen over the course of the pandemic, due to stress, boredom, and lack of access to fresh food due to shop closures.¹⁴ Many parents have reported difficulties in controlling their children's snack intake during the pandemic.¹⁵ Combined with poor access to dental care, financial difficulties, and an increase in xerostomia due to stress and mask use,¹⁶ we have seen the effect on these poor nutritional choices in the increased numbers of patients presenting with caries and periodontal disease. Our years of efforts in reinforcing prevention advice has been hampered, and the increased demand for treatment runs the risk of a focus on provision of treatment rather than prevention.

Active involvement of the whole dental team in nutritional advice, oral hygiene, smoking cessation and alcohol counselling is needed to promote and maintain good oral health, with delegation of responsibility and appropriate training of dental team members to facilitate this.^{17,18} Dental therapists and hygienists are valuable assets to dental practices, with their role in treating periodontal disease and caries allowing for a reduction in treatment waiting times and promotion of oral health education.¹⁹ A large drop in referrals for oral cancer was seen during the pandemic,²⁰ so it may be assumed more patients will present with abnormal mucosal lesions. Due to their familiarity with the oral mucosa, dental hygienists and therapists have an important role in detecting

oral cancers, and further training should be encouraged to improve confidence with this.²¹

Safeguarding

As a result of increased family contact, less interaction with professionals, and increases in stress levels and alcohol abuse, the pandemic has seen a surge in child abuse²² and domestic abuse.²³ A reported 1,493% increase in abusive head trauma in very young children was seen over a one-month period during the pandemic, compared to the previous three years.²⁴ There was also an increase in police recorded domestic abuse offences and demand for domestic abuse victim support.²³ As part of a dental team, we are trained to detect and report safeguarding concerns. Our familiarity with our patients and their relationships, our knowledge of their medical and social circumstances, and our education in recognising signs of non-accidental injury and neglect make us well-positioned to identify signs of abuse or safeguarding issues.²⁵ Now more than ever it is crucial we maintain our training and remain vigilant to these signs, to discuss concerns and consider referrals where appropriate, and to understand our own individual roles within our teams in handling such issues.

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Our role as a dental team extends beyond the provision of dental care. The risks to patients' general health and wellbeing resulting from the COVID-19 pandemic are being seen daily in dental practice. Our training and duty of care makes us well-placed to recognise these adverse effects, and to provide support and appropriate management to patients as a result. It is important that we utilise the skillsets of the whole dental team to treat patients holistically, and provide the best possible standard of care.

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