COVID-19 Pandemic: An Opportunity for Using Tele-Dentistry for a Better Dental Care

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Abbreviations:

COVID-19: coronavirus disease 2019 PPE: personal protection equipment WHO: World Health Organization

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Dear Editor,

The novel coronavirus disease 2019 (COVID-19) pandemic is currently the most important public health issue world-wide, which emerged in Wuhan, China in December 2019.¹ Globally, approximately 500 million people became infected and over six million lost their lives following COVID-19.² Due to the transmissibility of COVID-19 through respiratory droplets and aerosols, several preventive measures have been recommended by the World Health Organization (WHO; Geneva, Switzerland) for staying safe, including staying at home, social distancing, using personal protection equipment (PPE) like fitted masks, and self-isolation in case of feeling unwell.³ To observe the health protocols, people avoided going out unless for very urgent matters such as buying foodstuffs.⁴ Fear of becoming infected even led most people to reduce their unnecessary referrals to hospitals or clinics for elective surgeries or routine health care services.⁵

Although this helped prevent the spread of the disease, not receiving treatment for different diseases including dental and oral problems could disrupt public health training programs, delay diagnosis, and complicate the treatment process.^{6,7} This was especially important among pregnant women who needed to receive dental care, especially in the second trimester. Nonetheless, studies showed that to reduce any contact with other people, pregnant women mostly delayed or avoided their routine prenatal care, including dental checkups, which might lead to many maternal and neonatal consequences.^{8,9} To minimize the negative outcomes of not receiving dental and oral health care services by patients, and to reduce the professional and ethical concerns of dental health workers, several virtual platforms such as blogs, websites, and web-based and mobile-based health applications have been designed and promoted.¹⁰ These platforms have various potentials, including the provision of different services, raising oral hygiene awareness, history taking, examination, diagnosis, consultation, training, treatment, and follow-up.¹¹ It should be mentioned that the majority of these platforms are focused on providing preventive care and educational services and they are less treatment-based due to the requirement of special infrastructure schemes.¹²

It seems that many people's need for dentistry-related information has been met using search engines. Using the trends of Google search engine (Google Inc.; Mountain View, California USA), with around four billion users world-wide, two recent studies found a steep upward trend in online searches for dental problems and tele-dentistry.^{13,14} Additionally, a five-fold increase in the number of searches for "tele-dentistry" and a 30-fold increase for "PPE dentist" were recorded. Moreover, a 40-fold increase in the question "is it safe to go to the dentist" showed a high level of fear of going to the dentist.¹⁴ Fortunately, answers to most questions could be found in valid health-related websites such as WHO. Besides, history taking and examination in virtual platforms indicated a special opportunity for providing oral health services in remote areas. A study by Alabdullah, et al demonstrated that teledentistry could be comparable to in-person oral health visits, particularly in situations where access to dental and oral health care was restricted.¹⁵ Furthermore, intraoral scans in online examinations provide efficient screening and the correct triage of patients, which facilitate the process of remote diagnosis and detection of dental issues.¹⁶ Thus, it is considered a feasible and potentially cost-effective alternative to visual examination, and is even an appropriate method for children's dental problems screening that can prevent early childhood dental issues.^{17–19} After a correct diagnosis, dentist's consultation and communication with patients can also be performed virtually. It is mainly done via video calls, phone calls, or text messages and plays a critical role in advancing dental health, particularly in case of patients' limited access to health care services.²⁰⁻²² A study by Cook, et al revealed that tele-consultations decreased a great number of inappropriate orthodontic referrals to clinics and allowed dentists to visit more patients at a faster speed.²³ Regarding the treatment of oral diseases or dental problems, tele-dentistry has provided a chance for sharing patients' history, information, and other medical reports among the dentists who are far from each other.²⁴ A study by Berndt, et al demonstrated that orthodontic specialists could help general dentists in performing interceptive orthodontic treatments for disadvantaged children in restricted areas.²⁵ Moreover, tele-dentistry has been reported to be a useful and valid method for patient follow-ups by dental general practitioners and specialists, especially after maxillofacial surgeries. It is, in fact, considered as reliable as in-person visits.²⁶

These online services can benefit dental tourism, which is one of the most popular and profitable medical tourism segments.²⁷ They have a variety of advantages for patients, dentists, and the destination country's economy. Being virtually visited by well-known dentists and receiving online examinations and counseling can help reduce travel times and save time and money.²⁸ Moreover, providing an appropriate patient-doctor relationship and transparency provides a chance for an initial trust for receiving modern technology and high-quality health care services for more specific dental problems in the destination country. In addition, patient satisfaction can help attract more patients, eventually making the market bigger and more profitable in the country. Dentists will also benefit from this online communication.²⁸ Less commuting to clinics results in more visits and provides the opportunity for making money beyond the direct income of dental clinics. Furthermore, following the development of dental tourism in the destination country, an economic growth will occur, as this generates job opportunities and brings valuable currencies to the destination country.²⁷

Nonetheless, there are some factors that reduce people's access to online dental health platforms. Internet access and limited computer knowledge are the main challenges for not using dental telehealth care by people.²⁹ Besides, as the majority of web- or mobilebased tools are in English, non-English speakers do not seem to be easily able to use them and a translated version is needed.²⁹ The cost of the telemedicine equipment has also been a matter of concern, and their cost-effectiveness should be checked through preliminary investigations.³⁰ Moreover, some people have fear regarding the privacy and security of their medical information. Of course, they can use the platforms that meet the standards of the Health Insurance Portability and Accountability Act of 1996, known as HIPAA.³¹

Conclusion

The recent pandemic can be considered an opportunity encouraging people to use the virtual world more than before, especially in the field of oral and dental health. The advantages of using teledentistry outweigh its related risks, and it can help promote the dental tourism industry, as well. Considering the aforementioned opportunities and challenges, and with government's support, companies will be able to design a more appropriate and userfriendly online platform to provide most dental services, which can attract a larger number of patients and improve the industry's profitability.

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References

- World Health Organization (WHO). Responding to Community Spread of COVID-19. 2020. https://www.who.int/publications/i/item/responding-to-communityspread-of-covid-19. Access July 2022.
- Chopde A. COVID prediction using machine learning. Int J Novel Res Develop (IJNRD). 2022;7(1):64–67.
- Park J, Park M-S, Kim HJ, Song T-J. Association of cerebral venous thrombosis with mRNA COVID-19 vaccines: a disproportionality analysis of the World Health Organization pharmacovigilance database. *Vaccines*. 2022;10(5):799.
- Honarvar B, Lankarani KB, Kharmandar A, et al. Knowledge, attitudes, risk perceptions, and practices of adults toward COVID-19: a population and field-based study from Iran. *Int J Public Health.* 2020;65(6):731–739.
- Hartnett KP, Kite-Powell A, DeVies J, et al. Impact of the COVID-19 pandemic on emergency department visits—United States, January 1, 2019–May 30, 2020. MMWR. 2020;69(23):699.
- Findling MG, Blendon RJ, Benson JM, (eds). Delayed Care with Harmful Health Consequences—Reported Experiences from National Surveys during Coronavirus Disease 2019. JAMA Health Forum. Chicago, Illinois USA: American Medical Association; 2020.
- Obeidat L, Masarwa N, AlWarawreh A, El-Naji W. Dental treatments during the COVID-19 pandemic in three hospitals in Jordan: retrospective study. *Int J Med Res.* 2020;9(4):e24371.
- Maharlouei N, Asadi N, Bazrafshan K, et al. Knowledge and attitude regarding COVID-19 among pregnant women in Southwestern Iran in the early period of its outbreak: a cross-sectional study. *Am J Trop Med Hygiene*. 2020;103(6):2368.
- Adeniyi A, Donnelly L, Janssen P, et al. Pregnant women's perspectives on integrating preventive oral health in prenatal care. *BMC Preg Childbirth*. 2021;21(1):1–10.
- Bastani P, Mohammadpour M, Ghanbarzadegan A, Kapellas K, Do LG. Global concerns of dental and oral health workers during COVID-19 outbreak: a scope study on the concerns and the coping strategies. *Systematic Reviews*. 2021;10(1):1–9.
- Brown N, Northover R, Harford S, Power R. NHS general dental practitioner claims in the South West for provision of topical fluoride, fissure sealants, radiographs, fillings, and extractions for children born in 2009: an analysis of a five-year period. *British Dental Journal*. 2022:1–6.

- Marino R, Ghanim A. Tele-dentistry: a systematic review of the literature. *Journal of Telemedicine and Telecare*. 2013;19(4):179–183.
- Sycinska-Dziarnowska M, Maglitto M, Woźniak K, Spagnuolo G. Oral health and tele-dentistry interest during the COVID-19 pandemic. J Clinical Medicine. 2021;10(16):3532.
- Sofi-Mahmudi A, Shamsoddin E, Ghasemi P, Mehrabi Bahar A, Shaban Azad M, Sadeghi G. Association of COVID-19-imposed lockdown and online searches for toothache in Iran. *BMC Oral Health.* 2021;21(1):1–7.
- Alabdullah JH, Daniel SJ. A systematic review on the validity of tele-dentistry. *Telemedicine and e-Health.* 2018;24(8):639–648.
- Steinmeier S, Wiedemeier D, Hämmerle CH, Mühlemann S. Accuracy of remote diagnoses using intraoral scans captured in approximate true color: a pilot and validation study in tele-dentistry. *BMC Oral Health.* 2020;20(1):1–8.
- Kopycka-Kedzierawski D, Billings R. Prevalence of dental caries and dental care utilization in preschool urban children enrolled in a comparative-effectiveness study. *European Archives of Paediatric Dentistry*. 2011;12(3):133–138.
- Kopycka-Kedzierawski DT, Billings RJ, McConnochie KM. Dental screening of preschool children using tele-dentistry: a feasibility study. *Pediatric Dentistry*. 2007;29(3):209–213.
- Kopycka-Kedzierawski DT, Bell CH, Billings RJ. Prevalence of dental caries in Early Head Start children as diagnosed using tele-dentistry. *Pediatric Dentistry*. 2008;30(4):329–333.
- Beauquis J, Petit A-E, Michaux V, et al. Dental emergencies management in COVID-19 pandemic peak: a cohort study. J Dental Res. 2021;100(4):352–360.
- Pereira LJ, Pereira CV, Murata RM, et al. Biological and social aspects of Coronavirus Disease 2019 (COVID-19) related to oral health. *Brazilian Oral Research*. 2020;34.
- Fallahi HR, Keyhan SO, Zandian D, Kim S-G, Cheshmi B. Being a front-line dentist during the Covid-19 pandemic: a literature review. *Maxillofacial Plastic Reconstructive Surg*, 2020;42(1):1–9.
- Cook J, Edwards J, Mullings C, Stephens C. Dentists' opinions of an online orthodontic advice service. *Journal of Telemedicine and Telecare*. 2001;7(6):334–337.
- Kirshner M. The role of information technology and informatics research in the dentist-patient relationship. *Advances in Dental Research*. 2003;17(1):77–81.

- Berndt J, Leone P, King G. Using tele-dentistry to provide interceptive orthodontic services to disadvantaged children. *Am J Orthodontics Dentofacial Orthopedics*. 2008;134(5):700–706.
- 26. Chen R, Santo K, Wong G, et al. Mobile apps for dental caries prevention: systematic search and quality evaluation. *JMIR mHealth and uHealth*. 2021;9(1):e19958.
- Crooks VA, Kingsbury P, Snyder J, Johnston R. What is known about the patient's experience of medical tourism? A scoping review. *BMC Health Serv Res.* 2010;10(1):1–12.
- Bhambal A, Saxena S, Balsaraf SV. Tele-dentistry: potentials unexplored. J Int Oral Health. 2010;2(3):1–6.
- Tella A, Olanloye O, Ibiyemi O. Potential of tele-dentistry in the delivery of oral health services in developing countries. *Annals of Ibadan Postgrad Med.* 2019;17(2):115–123.
- Whitten PS, Mair FS, Haycox A, May CR, Williams TL, Hellmich S. Systematic review of cost effectiveness studies of telemedicine interventions. *BMJ*. 2002;324(7351):1434–1437.
- Atchinson BK, Fox DM. From the field: the politics of the health insurance portability and accountability act. *Health Affairs*. 1997;16(3):146–150.