Are there any entities outside the American Academy of Pediatric Dentistry (AAPD) influencing the oral health care for persons with special health care needs (PSHCN)? To answer this question, the potential influences were categorized into the following influential categories: (1) dental (other than AAPD) and nondental organizations; (2) diagnosis-based associations; (3) educational groups; (4) legislative bodies; (5) research-based groups; (6) industry groups; and (7) parents.

For historical purposes, 3 guidelines have been embraced by the dental community on a national level that have an impact on the safe delivery of health care to PSHCN:

1. In 1989, the Occupational Safety and Health Administration (OSHA) implemented the standard of universal precautions to minimize the risk of transmission of bloodborne infections in the healthcare environment;¹
2. The American Heart Association (AHA) maintains the infective endocarditis prophylaxis guidelines, with the most recent revision occurring in 1997;²
3. In 2003, the American Dental Association and the American Academy of Orthopaedic Surgeons issued an advisory statement regarding the dental care for individuals with orthopedic hardware.³

These 3 classic guidelines share the following features:
1. Experts convened to develop these guidelines.
2. They were well-disseminated and universally adopted.
3. They involve mechanisms for future revisions.
4. They included handouts/pocket guides for ease of use.

The primary organizational leader other than the AAPD advocating for PSHCN is the Special Care Dentistry Association (SCDA).⁴ SCDA provides an opportunity for colleagues across all fields of dentistry to interact and develop strategies to enhance the care of PSHCN. Advocacy efforts specific to PSHCN are the primary focus of SCDA.⁵

Other organizations influencing the oral health care of PSHCN are diagnostic-based organizations. The more prevalent the disease, the more likely oral health guidelines will exist within the organization’s materials. Table 1 lists 4 of the more prevalent conditions and their associated organization.⁶⁻⁹

There are nondental organizations that impact the care of PSHCN. The American Academy of Pediatrics (AAP) has made oral health one of the 3 main initiatives for its strategic plan for 2006-2007.¹⁰ To educate current and future pediatricians, the AAP has developed an Oral Health Training Module that is available to all residents in pediatric training programs in the United States as well as to all AAP members.

The American Academy of Family Physicians has recently required oral health education for accreditation of their residency programs. In conjunction with this requirement, oral health training modules entitled Smiles for Life: A

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Parents may have the following questions:

1. What dental conditions are part of the medical diagnosis (bruxism, oral self-abuse, delayed eruption, missing teeth)?
2. How do I access a dentist, and what should I expect at the first visit (facility accessibility, caregiver involvement)?
3. What are the special dental needs (communication, antibiotics, mouth props, restraints, muscle relaxants)?
4. Are there special prevention measures (eg, fluoride varnish, xylitol and chlorhexidine rinses, and spin brushes)?
5. How does medical treatment affect oral health (drug-induced xerostomia, delayed or missing teeth)?

To find answers to these questions, parents may access a variety of resources, including magazines (Exceptional Parent), brochures/handouts, local parent support groups, Internet searches and chat rooms, specific diagnosis based registries, Special Olympics networking, and Family Voices. In summary, PSCHN should be viewed as “people first” and every effort should be made through all these entities described to optimize every aspect of their oral health.

Table 1. DIAGNOSTIC-BASED ORGANIZATIONS FOR SPECIFIC DISABILITIES

<table>
<thead>
<tr>
<th>DIAGNOSIS</th>
<th>ORGANIZATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleft lip with or without cleft palate</td>
<td>American Cleft Palate-Craniofacial Association</td>
</tr>
<tr>
<td>Down syndrome</td>
<td>National Down Syndrome Society</td>
</tr>
<tr>
<td>Ectodermal dysplasia</td>
<td>National Foundation for Ectodermal Dysplasia</td>
</tr>
<tr>
<td>Autism</td>
<td>National Autism Society</td>
</tr>
</tbody>
</table>

References