## USE OF CASE MANAGEMENT METHOD IN CONTROLLING DENTAL HEALTH IN A CHILDREN COMMUNITY

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Abstract: In the last 100 years, the scientific progress regarding the ethology of dental caries determined a better understanding of the disease prevention and control. In this regard, caries control targets several important spheres of activity areas including: the use of flour, diet control, minimally invasive approach and some techniques for managing specific risk factors in children. The purpose of activities in the case management is the management and control of risk factors not responding to basic measures of general prevention of the caries. Through these measures, early carious lesions can be stopped and prevented from reaching cavities due to the achievement of some oral environment changes, favourable to remineralisations. Success in case management depends on the training of the members of the medical team to manage optimizing the link between patient motivation and his family and social resources available at any given time, for oral health care.

Despite all progress made in recent decades in the prevention and treatment of oral diseases, dental caries continue to be a major health problem even in economically developed countries. Complications of simple dental caries are causing significant pain that can lead to work loss or school-loss day. Untreated decay can affect general health and in some cases, even life.(1)

It requires knowledge of basal factors and preventive measures to be able to influence oral health and quality of life.

Children categories with increased caries risk include:

- children with numerous dental caries, abundant plaque due to a poor hygiene;
- children whose mothers present a large number of untreated caries;
- children who during sleeping ate a diet with sweetened liquids;
- children from families with low socioeconomic status (unemployed, socially assisted persons);
- children with affected health status.

Often, children with increased caries risk have no access to dental care or do not receive best practices to prevent caries disease in families. Case management in these situations can help the families of these children and the medical staff controlling and reducing risk factors.

At the same time, the increased risk control measures proposed can be used to reduce the costs of dental health. Success in case management in the patients with high-risk to dental caries should be based on the following principles:

- establishing a partnership between patients, their families and healthcare professionals who provide dental health;
- checking the correct granting of complicated social services;
- improving global health knowledge and especially those related to oral health;
- using communication strategies to help socially assisted families in achieving oral health.

In the medical literature, there are known differences in oral health due to socio-economic conditions. Thus, children

coming from low-income families have two times more caries than the children coming from middle-income families.(1,2,3)

These children risk dental caries complications, which cause pain associated with absence from school preparation, impaired well-being, due to emotional state represented by shyness and unhappiness.

Oral health differences may be due to different levels of care that are based on different categories of factors. First of all risk factors came from family (parental care model, child temperament, health knowledge level of parents, financial difficulties, anxiety and dental phobia).(4.5,6,7)

The second category of risk factors is a number of external factors, such as lack of unity that provide health care, lack of medical insurance, lack of concordance between the school time table and the health facility, lack of transportation between home and the health facility or socio-economic, cultural / ethnic discrimination.(8.9,10)

In reality, there are many families with increased caries risk to whom there is a combination of contributing factors from inside or outside of the family. There exist some parents who believe that providing emergency dental care is more important than prevention.

Other parents begin dental care as part of overall health, preventive dental care is considered as a parental responsibility.(11,12,13)

Social interventions seeking to improve oral health must benefit from various techniques and overcome some specific barriers.

The case management objectives must follow the steps. The case managing is a process of assessment, planning, facilitation and coordination of health care needs of an individual or a family, according to the possibility of communication and available resources at a time.(13)

This means the existence of a case manager who must carry out the following activities:

- assessment of the potential beneficiaries and of available resources:
- drawing an individualized plan for obtaining maximum

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results:

- easier communication between patient and medical team, information on treatment options, on health insurance and on community resources.
- achieving aims according to the patient's individual plan.

The strategies used in children dental disease case management include the following activities: motivational interview, activities to improve health knowledge, coordination of dental care, community mobilization and health education.

The success in this business depends on the training of the medical team members who manage to optimize the link between motivation of the patient and his family and the social resources available for oral health care.

Regarding infants and young children with special care needs for a good oral dental practice, we can say that they should receive the same dental care as the healthy patients. It is desirable that dental services in schools should play a more important role in the follow-up of the children from families with low socioeconomic level or in the ethnic minority.

Numerous medical organizations including American Association of Pediatric Dentistry, American Dental Association, American College of Dentists, believe it is unethical for a dentist to ignore the disease and patient dental illness or condition of age, disability or behavior.(14,15)

Application of case management in the prevention of early dental disease is a great potential to reduce the overall cost of care. Improving dental health through prevention in disadvantaged community is based on a strategy that includes personal motivation, increased health culture level, coordination of warning and mobilization in the community.

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