

# A call for attention to developmental disabilities in dental care

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## Editorial

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Well-maintained periodontal health is key to sustaining general health and quality of life. Many scholars and clinicians have endeavored to investigate the connections between illnesses and periodontal disease and to discover effective treatments for maintaining oral health.

Unfortunately, among the wide range of research contributions, there is one area which has often been neglected – dental care for patients with developmental disabilities such as autism. According to Dr. Inglehart of the University of Michigan in the paper published in *Journal of Dental Education* in 2005, more than 60% of randomly selected general dentists in Michigan showed reluctance to provide care for children as well as adults with autism.

In dental schools, students receive very minimal education on how to deal with uncooperative patients. Given this lack of knowledge, the most common methodology of handling such patients in clinics often involves general anesthesia or immobilization on a papoose board, which is far from what should be the first-line approach to those with developmental disabilities due to the risks of vomiting, nausea, and even, in very rare cases, brain damage.

Despite this lack of systematic professional development, some researchers have discovered ways of providing smoother and more effective dental care. Dr. Linda Nelson and her team at Boston Children's Hospital reported in this March's issue of *Clinical Pediatrics* that video goggles were mostly found to be effective in lowering stress during tooth cleaning. Scholars at the University of Southern California recently reported the effect of sensory adaptations in reducing distress in *BioMed Research International*. For their pilot study with children with autism as subjects, they found a decrease in behavioral and physiological distress and pain when dental cleanings were given in a dark room with highlighted illumination and a weighted vest.

One of the other alarming factors is that a multitude of children who were diagnosed with autism in the 90's are now transitioning from school to adult society. Experts have warned that the number of people who need specialized care is growing much faster than the number of people who provide this care.

At this point, we might reflect on Alan Gregg's words: 'The perpetual enemies of the human race, apart from man's own nature, are ignorance and disease.' Patients with developmental disabilities already have uncountable hurdles to clear. What we can do as scholars and practitioners in dental science is to make more elaborate efforts to better the quality of oral health of these patients in the future.

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