Editorial

Integrating Oral Health into Pediatric Care In Nigeria: The Time Is Now

Reducing the burden of caries in young children requires a multidisciplinary approach involving collaboration between dental and primary care providers. Primary care providers are uniquely positioned to deliver initial preventive oral health care to infants and toddlers. This is because infants typically attend around six well-baby visits before their first birthday. Additionally, infants and toddlers are more likely to see a physician or primary care provider than a dentist before age three—a critical period when caries develop rapidly.[1]

In Nigeria, however, the average age of a child's first dental visit is seven to nine years.[2,3] By this time, irreversible damage to teeth has often occurred, leading to extractions and premature tooth loss. Early childhood caries is preventable, yet untreated caries can have long-term detrimental effects on the child, their family, the community, and the health system.[2]

As paediatric dentists, we must move beyond working in isolation and actively collaborate with paediatricians, family physicians, nurses, community health workers, and other non-dental primary care providers to reduce the incidence of caries. Integrating oral health into primary care is not a new concept; several organizations support this approach for children. Professional bodies and institutions recommend conducting caries risk assessments (CRA) and providing preventive oral health services (POHS) in medical settings.

The U.S. Preventive Services Task Force (USPSTF) advises primary care clinicians to apply fluoride varnish to the primary teeth of all infants and children as soon as the teeth begin to erupt.[4] Similarly, the American Academy of Pediatrics (AAP) recommends oral health risk assessments at every routine well-child visit starting at six months of age.[5]

Furthermore, the 2000 U.S. Surgeon General's report Oral Health in America and its 2021 follow-up from the National Institutes of Health emphasize the importance of integrating oral health into primary care settings.[6] This collaborative approach can significantly enhance the prevention and management of early childhood caries, benefiting not only children but also the broader community and healthcare systems.

Significant progress has been made in recent years. The American Medical Association (AMA) introduced a current procedural terminology (CPT) code for the application of fluoride varnish by primary care health professionals and more recently, in 2022, the AMA approved another CPT code for the application of silver diamine fluoride (SDF) by primary care professionals. SDF is a non-invasive treatment that arrests dental caries, reducing the need for more invasive procedures such as fillings. These CPT codes enable reimbursement for preventive oral health care delivered by non-dental healthcare providers, further reinforcing their role in managing children's oral health in medical settings.[7]

As paediatric dental professionals, we must take decisive action. While initial barriers exist—such as limited training in early childhood oral health for primary care providers and inadequate funding—these challenges can be addressed through sustained advocacy and collaboration.[8]

A significant milestone in this effort was achieved in October 2017, when the first training program for paediatric nurses in Nigeria on early childhood oral health, including fluoride varnish application, was conducted at the Lagos University Teaching Hospital. This two-day training, supported by the Christensen Professorship Grant from the University of Iowa, also involved the development of culturally tailored paediatric oral health educational booklets for non-dental primary care providers. The training was well-attended, with participation from paediatric dentists across all geopolitical zones of Nigeria, who played a vital role in facilitating the sessions.[9]

The outcomes of this project demonstrated that non-dental primary care providers are eager to receive training and collaborate with dental professionals to improve oral healthcare for children. Despite this success, there remains a significant gap in fully integrating oral health into the primary care system for Nigerian children. While considerable efforts have been made, more action and research are necessary to implement and sustain these changes.

The time to act is now. Let us build on these foundational efforts to ensure every child in Nigeria has access to integrated and preventive oral health care.

REFERENCES

1. Kagihara LE, Niederhauser VP, Stark M. Assessment, management, and prevention of early childhood caries. J Am Acad Nurse Pract. 2009; 21(1):1-10.

www.jpdrp-napd.org

2. Olatosi OO, Onyejaka NK, Oyapero A, Ashaolu JF, Abe A. Age and reasons for first dental visit among children in Lagos, Nigeria. Niger Postgrad Med J. 2019; 26(3):158-163.
3. Omotuyole AS, Ayebameru OE, Yemitan TA, Iroayo OE, Salami OS. Age and reason of first visit among children seen at the paediatric dental unit of the Lagos State University Teaching Hospital. International Journal of Science and Research Archive, 2023, 09(01), 498–504
4. Davidson KW, Barry MJ, Mangione CM, Cabana M, Caughey AB, Davis EM, Donahue KE, Doubeni CA, Kubik M, Li L et al. 2021. Screening and interventions to prevent dental caries in children younger than 5 years: Us preventive services task force recommendation statement. JAMA: Journal of the American Medical Association. 326(21):2172-2178.
5. Clark MB, Keels MA, Slayton RL. 2020. Fluoride use in caries prevention in the primary care setting. Pediatrics. 146(6):1-11.
6. Oral health in America: A report of the surgeon general. 2000. J Calif Dent Assoc. 28(9):685-695.
7. Reno N. 2024. Integrating oral health care into primary. Association of State and Territorial Dental Directors; Washington, DC: National Maternal and Child Oral Health Resource Center.
8. Olatosi OO, Sote EO, Akinsola OJ, Oredugba FA, Adenaike AS. Prevention of dental caries: knowledge, practice and opinion of paediatricians in Lagos. West Afr J Med. 2013;32(1):52-56
9. Olatosi OO, Oladugba A, Oyapero A, Belie F, Owais AI, Weber-Gasparoni K, Sote EO, Butali A. A Preexperimental Study to Assess the Impact of an Interdisciplinary Educational Intervention on Nurses' Knowledge of Perinatal and Infant Oral Health Care. J Int Soc Prev Community Dent. 2019 Nov 4;9(6):619-629. doi: 10.4103/jispcd.JISPCD_144_19. Erratum in: J Int Soc Prev Community Dent. 2020 Apr 27;10(2):236. doi: 10.4103/2231-0762.279559. PMID: 32039083; PMCID: PMC6905320.

Olubukola Olamide Olatosi BDS, MPH, FMCDS, PhD

www.jpdrp-napd.org