Pediatric Oral Health Research and Policy Center

If You Are One of the 2,549—the AAPD Thanks You

A total of 2,549 AAPD members responded to the 2017 Survey of Pediatric Dental Practice, contributing valuable time during their busy summer schedules to provide worthwhile information on their patients and practices. The survey was distributed to 6,505 selected members during June and July. The response rate of 39 percent (2,549/6,505) was remarkable in view of the barrage of survey requests typically faced by AAPD members. Selected at random from all survey participants, Dr. Nicholas S. Katchen of Livingston, New Jersey, was the winner of two free registrations to the AAPD 2018 Annual Session in Honolulu, Hawaii.

Similar to the ADA/AAPD Survey of Dental Practice of 2011, this survey will supply current information on critical functions of pediatric dental practices, as well as offer insights into the comprehensive pediatric dentist workforce study being conducted by the Center for Health Workforce Studies, Albany, N.Y. The high response rate of survey participants will help create more accurate predictive models of future supply and demand for pediatric dentists in the workforce study results.

New Technical Brief

Are Your Kids Covered? Medicaid Coverage for Essential Oral Health Benefits

This technical brief presents the findings of a POHRPC research project on state Medicaid coverage of selected dental procedures by Erica Caffrey, D.D.S., M.S., 2016-2017 Samuel D. Harris Fellow. It identifies the pediatric dental procedures most essential for coverage, catalogs the coverage of these procedures by state, and specifies problem areas of coverage for oral health services. Designed as a state-level advocacy resource, this publication will be of valuable assistance to members as they champion for extended access to care through public insurance of oral health services for children. The brief was co-authored by Anupama R. Tate, D.D.S., M.S.; Scott W. Cashion, D.D.S., M.S.; Jessica Y. Lee, D.D.S., M.S.; Paul Casamassimo, D.D.S., M.S.; Robin Wright, M.A., Ph.D.; C. Scott Litch, M.A., J.D.; Mary Essling, R.D.H., M.S.

Visit http://www.aapd.org/assets/1/7/AreYourKidsCoveredfinal.pdf to download a free copy.
Pilot of Predictive Model for Caries Risk Geared Toward Primary Care Providers

The AAPD Policy Center is pilot testing a predictive model for caries as a part of a three-year study of oral health in primary care. A sample of patient records from Nationwide Children Hospital’s baby dental clinic from between January and July of 2017 are being studied to test the predictive model developed earlier this year.

The predictive model is based on information readily available in the medical record and aims to characterize the likelihood that, based upon information noted in the early well-child visits, subjects would have predictable outcomes correlating with oral health disease. The outcomes were defined as patients having either dental caries at the time of their first dental visit or a high value on the caries risk assessment performed at their first dental visit.

A child’s age at the first dental visit was a strong predictor of caries risk in both outcome models. In other words, the timing of the first visit accounts for a good portion of the models’ abilities to predict the proportion of patients with existing caries or high risk for caries. Four risk factors were statistically significant and retained in the predictive model for high risk of caries:
- Age at the first dental visit
- Language other than English
- Breastfeeding
- 20 percent no-show rate for health-related appointments

This study demonstrates that risk factors present in a child’s medical record may be used to predict the presence of dental disease and/or the assessment of high caries risk at the time of the child’s first dental visit. Predictive models may be used to refer children for dental care based only on information available in current medical records from well-child visits.

Visit the POHRPC webpage at http://www.aapd.org to view the full Year 2 Report.

Evidence-Based Dentistry Committee Update

The EBD Committee has been active this year overseeing two new EBD guidelines:

**CLINICAL PRACTICE GUIDELINES FOR USE OF VITAL Pulp Therapies in Primary Teeth With Deep Caries**

**CLINICAL PRACTICE GUIDELINE ON THE USE OF SILVER DIAMINE FLUORIDE FOR DENTAL CARIES MANAGEMENT IN CHILDREN, ADOLESCENTS AND INDIVIDUALS WITH SPECIAL HEALTHCARE NEEDS**

Both guidelines provide evidence-based recommendations and guidance on the use of their respective therapies in children; the silver diamine fluoride (SDF) guideline provides a detailed protocol on the use of SDF to aid practitioners in the application of this new treatment. These EBD guidelines will appear in the newly reorganized 2017-2018 Reference Manual and reflect the changes outlined in the EBDC 2016 report to the Board of Trustees, “Recommendations on Securing Inclusion of AAPD Clinical Practice Guidelines in the National Guideline Clearinghouse.”

The Appraisal of Guidelines Research & Evaluation (“AGREE”) reporting checklist has been used to develop a standard template for EBD guidelines. Standardization of guideline manuscripts will allow the membership to become acquainted with the evidence-based process through rote presentation. Even though the subject matter differs across guidelines, the organization will be the same, or very similar, allowing users to quickly find the information they need.

The AAPD’s evidence-based guidelines are being produced in accordance with standards created by National Academy of Medicine (formerly known as the Institute of Medicine) and mandated by the National Guideline Clearinghouse (NGC), an initiative of the Agency for Healthcare Research and Quality, and therefore will be eligible to be included in the NGC. Inclusion in the NGC guarantees our guidelines will be seen by private and public payers. The guidelines will be available as open access publications on the AAPD’s website.

AAPD Research Agenda Update

The Council on Scientific Affairs, chaired by Donald L. Chi, D.D.S., Ph.D., updated the AAPD Research Agenda for 2017 – 2018 to encourage evidence-based clinical care and help improve patient and population oral health. The Research Agenda, as approved by the AAPD board of trustees, urges funding agencies to devote resources to the following areas:

- Prevention and management of dental caries (e.g., biosensors and technologies to monitor health, precision oral health care, emerging chemotherapeutics).
- Interdisciplinary research to understand and eliminate oral health disparities and promote population oral health (e.g., basic behavioral and social determinants of health, development of evidence-based public health interventions, integration of dentistry into the health care delivery system, interoperable databases between medicine and dentistry, models of inter-professional collaboration, training, and team science).
- Translational research to move scientific knowledge into practice and policy (e.g., dissemination and implementation of evidence-based care into clinical practice, barriers to dissemination and implementation, policy and practice partnerships).