



# Proceedings of the European Workshop on Oral Care and General Health

Opportunities for the Dental Hygienists in Health Education in the New Century

Castle of Münchenwiler, Berne, Switzerland April 26-29, 2003

> Edited by Niklas P. Lang

Sponsored by the Clinical Research Foundation (CRF) for the Promotion of Oral Health,
University of Berne

Supported by an educational grant from Oral-B Laboratories

# **Scientific and Organizing Committees**

# **Scientific committee:**

Niklaus P. Lang, Berne, Switzerland Angela Fundak, Genéve, Switzerland/Australia Bob Noble, UK Paul Warren, Boston, Mass. USA

### **Information services:**

Rolf Attström, Malmö & Brienz, Sweden & Switzerland

# Organizing committee: University of Berne, Switzerland

Barbara Frutig Ursula Heri Niklaus P. Lang Christoph A. Ramseier

# Secretarial assistance and desk editing:

Beatrice Gerber Jeanne Wurz

# **Acknowledgements**

The **Oral Care and General Health** workshop was supported by an educational grant from **Oral B Laboratories**. Without this substantial financial support the workshop would not have been possible.

# **Preface**

Münchenwiler Castle in the Canton of Berne, Switzerland has – for the second time – hosted a European Workshop under the elaborate title of *Oral Care and General Health – Opportunities for the Dental Hygienists in Health Education in the New Century*.

As in 1998, this workshop represented a joint effort between industry and the profession to disseminate scientific information to the Dental Hygienist profession within Europe. While the first workshop 5 years ago addressed Mechanical Plaque Control with all its facets, the present workshop addressed the educators of Dental Hygienist Curricula and discussed recently emerging issues from basic and clinical research that may indeed be implemented in the daily activities of dental hygienists.

The dental hygienist profession is regularly most likely to provide oral care for an increasingly health and dental-aware population. It is, therefore, evident that the same profession is also well suited to educate the population in health aspects other than those strictly defined by the oral environment. With increasing evidence emerging from associational, but also interventional studies, the relationships between the oral environment and general health are no longer to be disregarded in the clinical activities of dental hygienists. Hence, the implementation of these aspects has to be addressed during the education and training of dental hygienist students.

Three recently emerging and relatively novel topics, such as the association of systemic health and oral diseases, periodontal risk management, and smoking prevention and cessation were dis-

cussed. In addition, recent developments in the area of nutritional aspects and their role in oral healthcare and last, but not least, a critical appraisal of new developments in the field of oral hygiene practices were topics of this second workshop for dental hygienist educators.

The proceedings of this workshop include the position papers of the five working sessions and a consensus report of each session. All the consensus reports of the sessions have been approved by the plenary of the entire workshop. Hence, the implementation of the conclusions will be based on scientific evidence and recommendations made by a group of experts involved in dental hygiene education. It is desirable that the topics of the workshop will be given due consideration for the development of modern education in the Dental Hygienist Curricula for the 21st century.

Last, but not least the generous support of Braun Oral B Laboratories is highly appreciated. This workshop would not have been possible without their vision and initiative for the implementation of scientific evidence into the educational systems of dental hygienists.

In agreement with the Policy Statement approved by the plenary session of this workshop, dental hygienists will play a key role in changing behavioral patterns of patients, thus improving both oral health and quality of life.

Niklaus P. Lang



# **Participants List**

# **Session A: Systemic Health and Periodontal Disease:**

Stefan Renvert, Chairman, S; Kerstin Önrn, Co-chair, S; Jose Echeverria, Secretary, E

Marianne Eiskjær, DK; José Gonzales, D; Christa Haubensack, CH; Mabel Slater, UK; Sophie Szabo, CH; Paula Yli-Junnila, SF; Ubele van der Velden, NL; Marianne Corbey Verheggen, NL; Bob Noble, UK/CH

# **Session B: Risk Management:**

Rutger Persson, Chairman, USA/CH; Jean Suvan, Co-chair, UK; Frank Abbas, Secretary, NL Daniele Botticelli, I; Lilan Brunner Briw, CH; Daniel Etienne, F; Claudia Luciak-Dönsberger, A; Gregor Petersilka, D; Bjarni Pjetursson, ISL/CH; Antonella Tani Botticelli, I; Helene Thorstensson, S;

MaryAnn Cugini, USA

# **Session C: Nutritional Impact on Oral Health Promotion**

Paula Moynihan, Chair, UK; Marjolyn Hovius, Co-Chair, NL; Rolf Attström, Secretary, S

Michel Brecx, F; Sieka Beun-de Groot, NL; Noel Claffey, EI; Jørn Døi, DK; Hue Lang-Hua, CH; Susan Padrutt, CH; Andrea Ristau, CH; Ulrich P. Saxer, CH; Paul Warren, UK, D, USA

# **Session D: Oral Hygiene Revisited**

Alberto Sicilia, Chairman, E; Bernita Bush Gissler, Co-chair, CH; Ioannis Fourmousis, Secretary, GR Miguel de Araujo Nobre, P; Connie Fuglsig, DK; Giedere Matuliene, LIT/CH; Susanne Nyffenegger, CH; Mary Rose Pincelli-Boglione, I; Sue Skinner, UK; Fridus van der Weijden, NL; Ion Zabalegui, E; Angela Fundak, AUS

# **Session E: Smoking Cessation**

Christoph A. Ramseier, Chair, CH; Birgitta Scder, Co-chair, S; Pierre C. Baehni, CH

Orhun Dörtbudak, A; Pedro Ferreira, P; Rikke Friis- Pedersen, CH; Maxine Leathem, UK; Paola Marzola, I; Ruth Højgaard, DK; Helena Rebelo, P; *Joerg Strate, D* 

Representatives of Braun Oral B Laboratories

# Scope of the working sessions:

## **Session A**

# Systemic Health and Destructive Periodontal Diseases (Renvert, Örn, Echeverria)

- 1) What is the rationale, priority and evidence for considering systemic disease in the hygienists' curricula?
- 2) What are the systemic diseases most likely affected by chronic periodontitis?
- 3) What are the systemic conditions affecting the pathogenesis of periodontitis?
- 4) How is the knowledge of these interactions implemented in practice by dental hygienists?
- 5) Which conditions necessitate interaction with the dentist and/or the medical profession?

### **Session B**

# Periodontal Risk Management (PRM) (Persson, Suvan, Abbas)

- 1) What is the rationale and priority for risk factor management in the hygienists' curricula?
- 2) What is the current assessment system of Risk Factors?
  - Prior to therapy
  - Following therapy
  - During Supportive Periodontal Therapy (SPT)
  - Hygienists role in identifying risk factors
- 3) How does risk factor assessment affect the delivery of SPT?
- 4) What is the implementation of risk factor management in the hygienists' curricula?

### **Session C**

# Nutritional Impact in Oral Health Promotion (Moynihan, Hovius, Attström)

- 1) What is the rationale and priority for including nutritional analysis/dietary counseling in the hygienists' curricula?
- 2) How is dietary analysis performed?
  - Identify target groups (Obesity/anorexia/bulimia/ high caries risk children & geriodontic patients
  - Tools
  - When to interfere and how to monitor.
  - Interaction with other health professionals (Multi-disciplinary teams?)
- 3) What are today's recommendations regarding dietary sugar intake?
  - Age group related
  - Primary and secondary caries prevention
  - Prevention of erosions
  - · Risk assessment and management
- 4) What is the current recommendation regarding sugar substitutes?
  - European/International Guidelines
  - Industry practices
- 5) What are the recommendations for fluoride supplementation/application in various target groups?

### Session D

# Home Oral Hygiene Revisited. Options and Evidence (Sicilia, Bush Gissler, Fourmousis)

- 1) In teaching oral hygiene practices, what are the rationales and priorities attributed to mechanical vs chemical, and manual vs powered tooth cleansing techniques in the hygienists' curricula?
- 2) How are oral hygiene practices implemented?
  - · Identification of target groups
  - Tools available
  - Monitoring of clinical success
  - · Role of chemical plaque control in primary and secondary prevention
- 3) How is the teaching of powered toothbrushes implemented?
  - Relative efficacy
  - · Awareness of the public related to the effectiveness
  - Instruction of techniques
- 4) What is the role of interdental cleansing in the light of recent developments?
- 5) What should hygienists' curricula teach in terms of powered and manual toothbrushing and interdental cleansing?

### Session E

# Smoking Prevention and Cessation (Ramseier, Scder, Baehni)

- 1) What is the rationale and priority for including smoking cessation counseling in the hygienists' curricula?
- 2) How is smoking cessation counseling implemented?
  - Identify target groups (According to willingness, success and history of previous attempts)
  - Tools (Short term and long term interventions)
  - How to interfere and how to monitor.
  - Interaction with other health professionals (Multi-disciplinary teams?)
  - Role of nicotine substitutes (Chewing gum, tablets etc.)
  - Chewing tobacco/snuff etc.
- 3) What is our current knowledge on the effects of chewing tobacco and snuff consumption?
  - · Risk factor for stomatological diseases
- 4) How does smoking affect periodontal diagnosis and monitoring of disease?
  - Influence on gingival indices as a marker to oral health
  - Influence on clinical study design
- 5) What should hygienists' curricula teach in terms of smoking cessation programs for the various target groups? (Recommendations for a European approach)

# Oral Care and General Health Opportunities for the Dental Hygienists in Health Education in the New Century

# **Policy Statement**

Approved by the plenary session on 29 April 2003. The dental team should be educated and trained with the knowledge and skills required to be able to promote and maintain oral and general health.

In that context, motivation and instruction in oral hygiene practices, dietary intervention and smoking cessation programs should only be considered within the holistic approach to the patient. The workshop participants recognized that dental hygienists have an established role as oral health promoters and educators. Dental hygienists have the advantage of meeting the patients often and on a regular basis. This allows dental hygienists to play a key role in changing behavioral patterns, thus improving both oral health and quality of life of the patients.