

The Physical and Clinical Challenges Related to Oral Healthcare for Patients with a High BMI

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Irish Society for
Disability & Oral Health

England – most people are overweight or obese

- adults ^a ($\geq 16y$)
 - 61% overweight
 - 25% obese
- children
 - 34% of 2-15 year olds - overweight
 - 19% of 10-11 year olds - obese
- cost to NHS > £5 billion / y

Dental patients who are heavy have a right to access safe, dignified care

Everyone has the right to be treated with respect, to have their values and beliefs maintained and to receive care that maintains their privacy and dignity

What does dignity mean to you?



Put dignity at the heart of everything you do

To find out more on dignity, go to www.rcn.org.uk/dignity

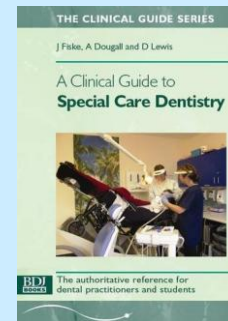


Barriers to Dental Care



Access

- travel arrangements
- waiting room
- clinical areas



Financial

- Failure to invest in bariatric facilities.



Barriers to Dental Care



Comorbidities



Attitudinal

- will increase referral base
- poor knowledge
 - Fear, no confidence, lack of support
- prejudice.

Dentists; Facilitators of General Health

- a cohort of pts who attend dental practices more frequently than primary medical services
- Dental teams are in strong position to identify pts at high risk of general medical health problems
- Supports a preventive general healthcare philosophy by the dental team.

Come Clean



Lance Armstrong

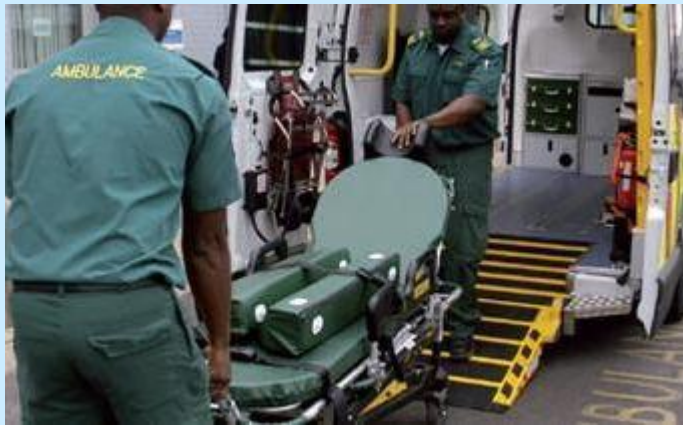
The Patient Journey



- mobility
 - ambulant +/- walking aids
 - wheelchair /stretcher user
- elective *versus* emergency care.

The Patient Journey

Transport to and from surgery





The supersize epidemic: EVERY ambulance service in country forced to buy special kit to deal with obesity crisis

Site Web



- Obesity epidemic
- Many services have spent £90,000 of taxpayers' money on 'bariatric' ambulances to move the very heaviest.

Obese patients are forcing bosses to revamp their ambulances with equipment such as £4,500 hoists

The Clinic

- Access.....
 - mobility problems?
 - Domiciliary?



Bariatric
wheelchair
50st 318kg

Arrival at The Clinic

- Waiting area
 - Where to sit ?
 - social problems?



Standard bariatric Chair



Pre-consultation Preparation

Need some basic information to check referral is appropriate for your clinic
helps avoid complaints

- Patient's weight
- Use dental chair ?

dignity+respect
= Inclusion

I'm not half the woman I used to be! Morbidly obese woman shamed into losing 21st after dentist chair failed under strain of trying to lift her

- Denise Petty, from Walsall, was so embarrassed she resolved to take action
- Joined local Weight Watchers and had to 're-educate' herself about food
- Has gone from size 34 to a size 14 dress after four years of weight loss

By STEVE ROBSON
PUBLISHED: 01:36, 18 May 2013 | UPDATED: 01:38, 18 May 2013

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A woman branded morbidly obese by her GP has lost 21 stone in weight after an embarrassing trip to the dentists forced her to act.

Denise Petty has gone from a size 34 to a size 14 dress after four years of shedding the pounds.

She has lost so much weight, doctors told her last year a gastric band she had fitted was no longer working and she had been keeping the weight off herself.



Struggling with her weight: Denise Petty, 42, weighed 36 stone in 2009 and could not go upstairs without struggling for breath

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Where to treat?

Standard dental chair

22 stone

140 kg

Where to treat?

Dental Chair versus Trolley versus Wheelchair ?

250kg/ 39st 5lbs



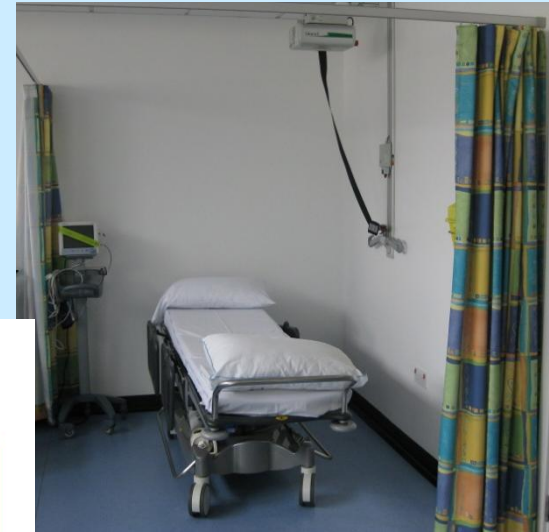
Mobile chair 350kg/ 55st

THE DIACO[®] BARIATRIC DENTAL CHAIR IS THE ONLY CHAIR ON THE MARKET WITH FULL DENTAL CAPABILITIES ALONGSIDE A SAFE WORKING LOAD OF 454KGS.



70st / 454kg / 1000lbs

barico[™]
the bariatric dental chair for all patient groups upto 71st / 454Kg / 1000lbs



270kg/ 42st 7lbs



Wheelchair Platform

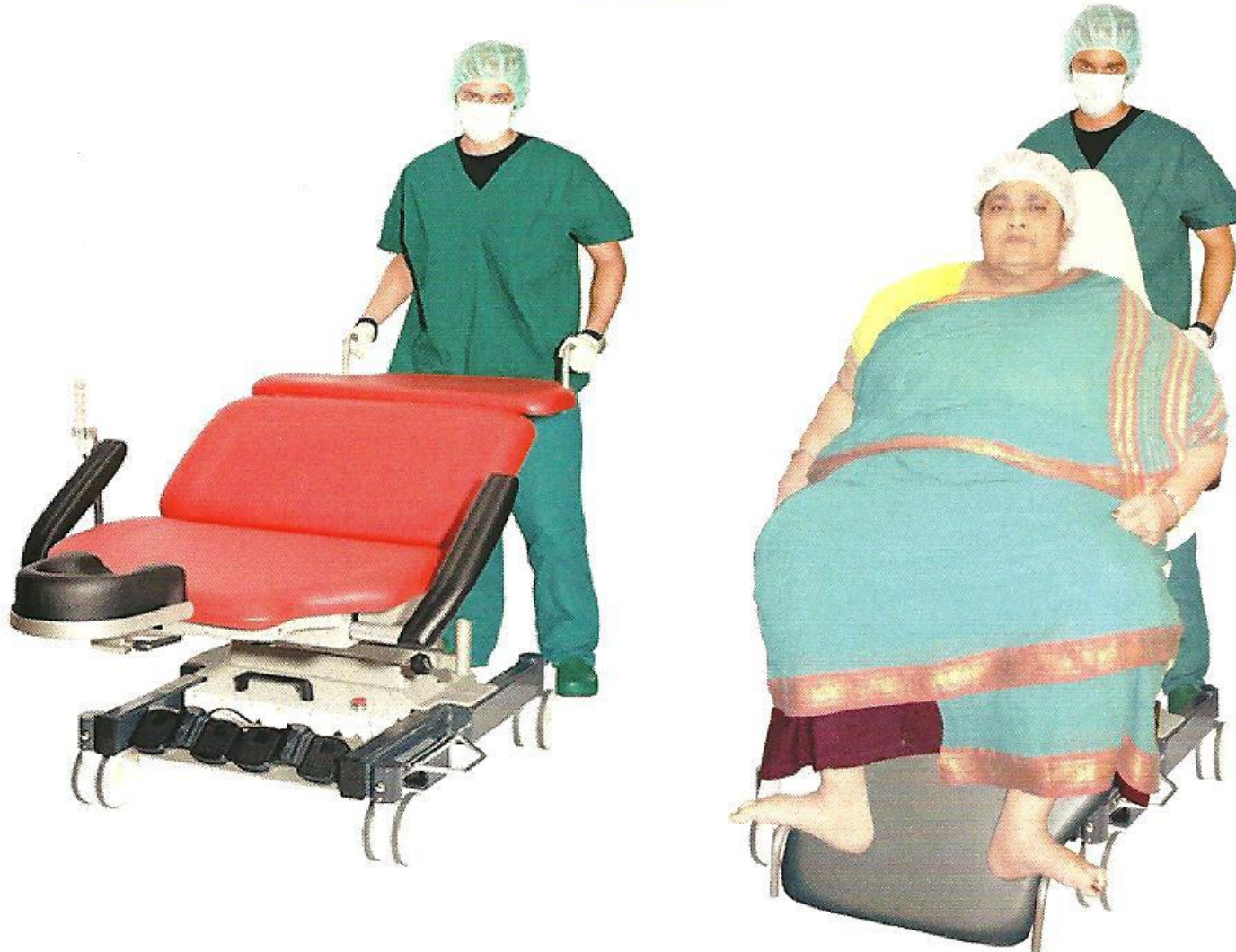


diaco™

 design specific
ENGINEERED SOLUTIONS

The Design Specific 770XXL BARIATRIC chair

55st
770LBS



Pre-consultation Preparation

- identify what you use for a pt bib
- Have a range of sizes of BP cuffs



The Consultation

Additional Information Gathering

- identify transport requirements
- reduced mobility?
 - Walking aids?
 - Manage movement/prevent muscle cramps/maintain circulation
 - skin integrity - wounds
- history of falls?
- weight, BMI, shape, shape / weight distribution.



The Consultation

Additional Information Gathering

- Check if chest pain at rest, dyspnoea on exertion, or if can walk 1-2 flight of stairs = High risk
- Sleep apnoea /CPAP#
- History of aspiration
- Acid reflux
- Anxiety around dentistry (Alan → angina)
- Supine position?
- support for weight loss program?
 - learning disability patients ?
- Hints/strategies → dental management



Examination

- how they get in and out of the dental chair



Examination

- how they get in and out of the dental chair
- achieve a good working position?
 - Pt respiration compromised?
- mouth opening
- Occlusal access to posterior teeth
- BP
- Leg support / stability

Transfer to other areas



Shuttle Chair 547kg 70st

Limited Access?

Transfer to dental chair/trolley



39st 5lbs



Treatment

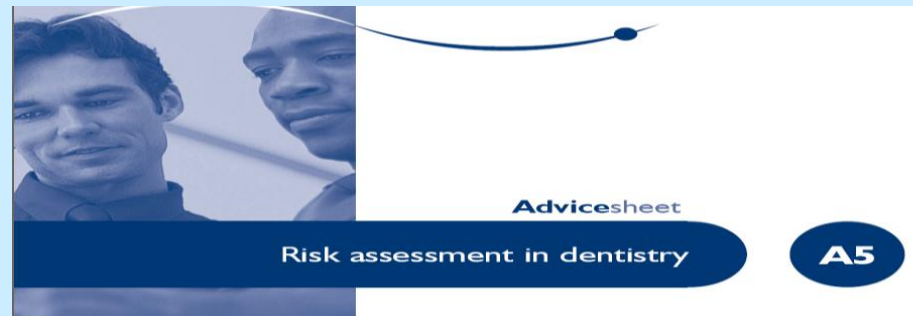
- Loss of anatomical landmarks ↑difficulty IDN blocks
- semi-supine to upright position
 - caution with long procedures can develop acute pulmonary oedema
- caution using dental dam if supine, some pts need to achieve a lip seal
- bring own CPAP machine?
- consider using pulse oximeter,
- need to supplemental O₂ for Rx under LA?
- altered pharmacokinetics
 - Volume distribution, renal clearance, hepatic metabolism, protein binding

Risk Assessment

- Risk awareness
- Consider carers, escorts, family
 - Slips/trips /falls
 - Walking aids
 - Care with patients in slippers!

Staff Safety

- Risk of musculoskeletal disorders
 - Back, neck, shoulder strains → poor, twisted, stooped posture, space constraints, unsuitable seating, poor lighting
- Ergonomically favourable seating, adequate lower back support
- Ensure all staff are "posture" aware
- Advise staff to report work related strains as soon as they become apparent'



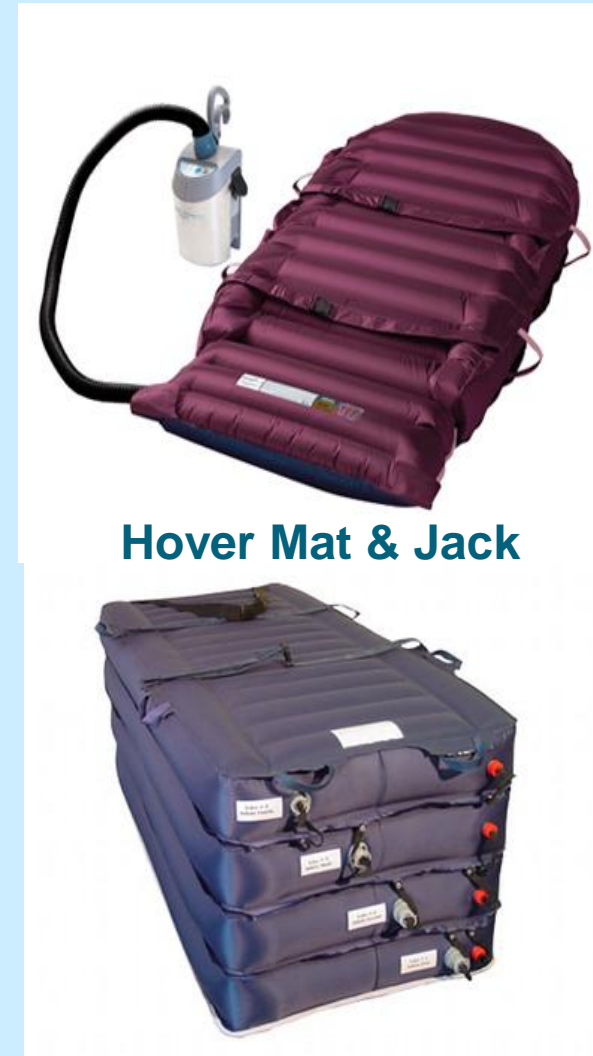
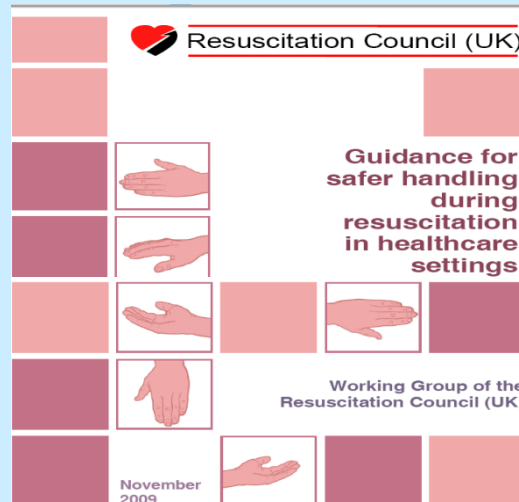
Toileting

- Traditional ceramic WC
→ approx 20 st.
- Heavy-duty toilet
surrounds converts
standard toilet → up to
70 stone
- Bariatric commode



Medical Emergencies

- collapse
- CPR



Hover Mat & Jack

The Flat Lift & Lateral Transfer Kit



1-The patient is positioned on the Flat Lifts Kit



2-The patient is maintained in the supine position whilst being safely raised to required height



3-The patient is safely laterally transferred to a bed or trolley with dignity and in comfort

Surgery Design



Medical Emergencies

- pulse oximetry, consider ear probe
- longer needles 3-4 inch for IM injections
- standard drug doses may be inappropriate
- Paracetamol overdose (risk of under estimating toxicity-use a ceiling weight of 110kg/17 st)

Developing a Quality Service

- training the dental team
 - moving and handling courses for larger pts
 - disability awareness training
 - motivational skills
 - Safeguarding / vulnerable adults
 - bariatric care
 - reflection
 - case based discussions
 - Policies & processes for the heavier patient



Training

- undergraduates and DCPs
- Educate dentists to ensure referrals are appropriate and informative

Developing a Quality Service

- prevention of oral disease
- shared care
- audit
 - service user input from bariatric pt
 - patient satisfaction survey
 - focus groups

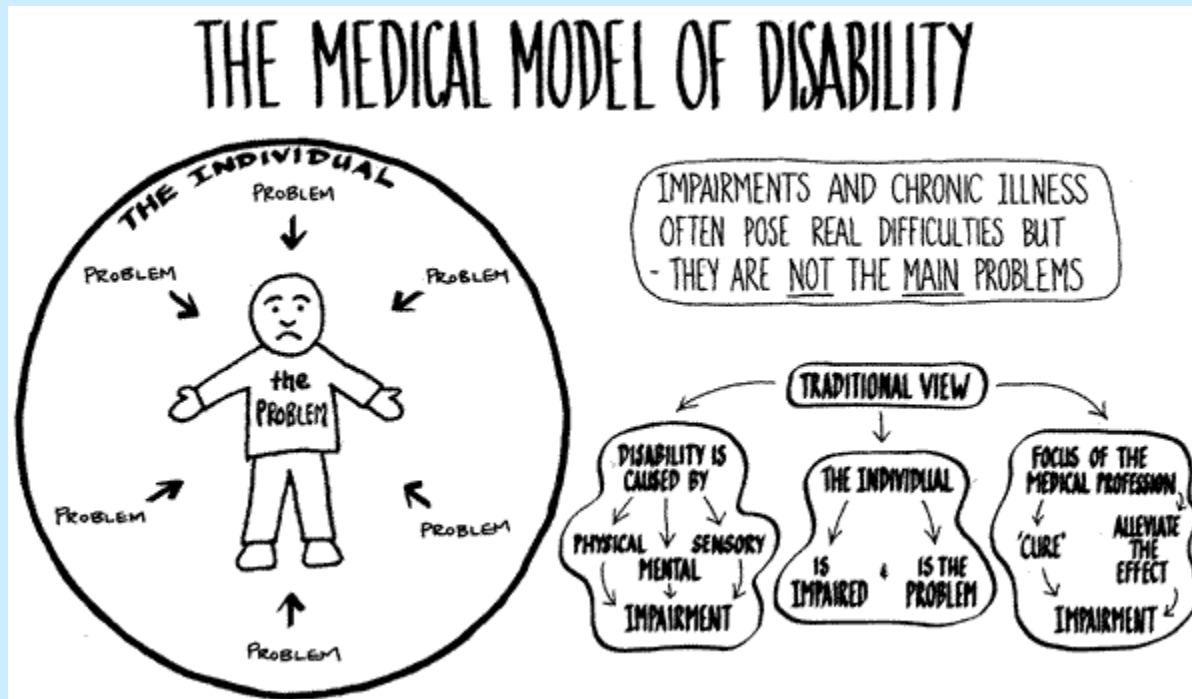


Developing a Quality Service

- **nurture** links with medical colleagues
 - moving and handling team → offer support, advice & equipment (hire)
 - Specialist nurses, dietitians, physicians, tissue viability nurses, anaesthetic support, psychologists, practice nurses
- national obesity forum
www.nationalobesityforum.org.uk

Models of health ...

- Need to move away from a purely medical model (what a person can and can't do) towards the social model ...



'Oral health and quality oral health care contribute to holistic health. It should be a right not a privilege.'

Journal of dental education 1984.



References

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