The Patient with a Disability
- including Wheelchair, Homebound, Nursing Home, & Terminally Ill

Presented by:
Sarah McMurray & Laura Hobart

The United States Americans with Disabilities Act (AWDA) Definition
- A person who "has a physical or mental impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment.

The World Health Organization, International Classification of Functioning, Disability, & Health (ICF)
- is a universal classification of a disability and health that provides a standard language and framework for the description of health and health related statuses.
- The ICF is a shift from the emphasis on people's disabilities to the focus on their level of health.

Examples of Barriers to Dental Care

<table>
<thead>
<tr>
<th>Barriers</th>
<th>Patient</th>
<th>Family (Children, Guardians)</th>
<th>Dental Professional</th>
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</thead>
<tbody>
<tr>
<td>Attitude Barriers</td>
<td>May not comprehend importance of dental health or want to or be able to cooperate.</td>
<td>May not be able to attend to their own oral health due to physical limitations.</td>
<td>May not feel adequately trained to meet safety or medically compromised patient.</td>
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<td>Physical Barriers</td>
<td>Fear of not being able to cope with nonfunctional barriers, fear of falling, or fear of attracting attention in an embarrassing way, all can be hindrances to seeking oral care.</td>
<td>May be unable to lift patient into chair or dental chair.</td>
<td>May not be wheelchair accessible or treatment rooms may too small to accommodate wheelchair confinement, and chairs may not be accessible; no parking spaces available.</td>
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<td>Financial Barriers</td>
<td>May have limited income because of disability affects employability.</td>
<td>May be unable to take time off from work to accompany patient to appointment.</td>
<td>May need construction to build handicap accessible features or buy specialized equipment. Longer appointment time may be needed for same care.</td>
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Levels of Function

**High Functioning Level**
- The high-functioning, total care group includes those capable of carrying out at least part of their oral hygiene needs but who require considerable training, assistance and direct supervision.

**Moderate Functioning Level**
- The moderate-functioning, partial care group includes those capable of carrying out at least part of their oral hygiene needs but who require considerable training, assistance and direct supervision.

**Low Functioning Level**
- The low-functioning, total care group includes those who are unable to attend to their own care and are therefore dependent.

Many patients, particularly children and those of all ages who disabled mentally, need varying degrees of encouragement, motivation, and supervision.

Scheduling of Patient

**Time of Appointment**
- Elderly patients: morning appointments
- Patients with arthritis: greater mobility late morning/afternoon
- The caregivers schedule must be taken into account.

Preparing for the Patient

**Information needed to prepare for the patient**
- Medical History
- Dental History
- Basic Info
  - Does the patient have a guardian? Caregiver?
  - Will someone accompany the patient to the apt? 
  - What is the patient's degree of independence?
- Supplemental Information
Assisting an Ambulatory Patient

An ambulatory patient is one that can walk but may still have some physical disabilities that can affect their dental treatment. What are some treatment modifications for the following types of patients?

Examples of ambulatory disabilities:
- Deaf
- Blind
- Multiple Sclerosis
- Autistic
- Downs syndrome
- Amputation
- Learning disabled
- Oxygen dependent
- Stroke
- ADD/ADHD

The Wheelchair Bound Patient

• Barrier Free: structural or architectural design that does not impede use by individuals with special physical needs

The Wheelchair Bound Patient

“Barrier Free”

External
- Parking Spaces
- Walkways
- Entrance

Internal
- Passageways
- Floors
- Reception Area
- The Treatment Room

The Homebound Patient

• Common oral problems:

• Objectives of DH care:

• Instruments and Equipment:

• Treatment Location:

The Terminally Ill Patient

Objectives of DH Care:
- Emphasizes symptom relief only
- Alleviate pain
- Provide a clean mouth feeling and reduce malodor
- Improve appearance
- Educate patients and caregivers on daily oral hygiene
- A clean mouth improves quality of life for patient

Oral Lesions:
- Frequent visual inspection for oral lesions to prevent pain and infection
- Common oral lesions include:
  - Candidiasis (in 79% of patients)
  - Glossitis
  - Denture stomatitis
- Xerostomia is also very common due to medications.
Disease Prevention & Control

Preventative Program Concepts

- Education
- Dental Biofilm Control
- Fluorides
- Pit & Fissure Sealants
- Diet Counseling
- Smoking Cessation
- Regular check-ups

Communicating with Caregivers

General Suggestions:

- Place
- Techniques
- Tips

Helpful Positions:

- Caregiver Standing
- Caregiver Seated

Self Care Aids

Toothbrushes:

For patients who...
- Has fingers permanently grasped
- Cannot grasp and hold
- Has limited hand closure
- Is unable to lift hand or arm
- Can hold and position the brush but not manipulate

Interdental Aids:
- Floss holders

Removable Prosthesis Care:

- Denture brush handles can be adapted the same way as toothbrush handles.
- Available with suction cups to attach to sink.

Oral Manifestations

Congenital Malformations:

- Cleft lip or palate
- Malformed jaws, malocclusion, and malposed teeth.
- Tooth defects include variation in number and structure

Oral Injuries:

- Trauma to Teeth & Soft Tissues due to accidents, self-abuse, or seizures
- Attrition or chipped/fractured Teeth

Examples of Drugs Taken By Disabled Patients

- Seizure disorders: Dilantin
- Down syndrome: Thyroid Hormone
- Muscular Dystrophy and Multiple Sclerosis: Prednisone
- Autism: Risperdal and Olanzapine for irritability and aggression
- Stroke: Asprin, Plavix
- ADD/ADHD: Ritalin, Adderall, Concerta
- Terminally ill: radiation therapy/chemotherapy
- Anti-rejection: Cyclosporine
Tennessee Board of Dentistry and Americans with Disabilities Act

Tennessee Rules/Laws regarding patient’s with disabilities:
http://www.state.tn.us/sos/rules/0460/0460-03.pdf
(see page 13, #2)

2010 Americans with Disabilities Act STANDARDS FOR ACCESSIBLE DESIGN
http://www.ada.gov/2010ADAstandards_index.htm

How can you contribute?
• Motivate the patient and the caregiver to establish regular check-ups
• Contribute to the patient’s overall health
• Always have an encouraging attitude
• Aid in patient’s personal appearance and social acceptance
• Make appointments pleasant and comfortable

References:
• Wilkins, C. (2009) Clinical Practice of the Dental Hygienist. Care of Patients with Disabilities | Chapter 53 pg. 871 – 896 | The Patient who is Homebound | Chapter 54 pg. 900 – 908 | Baltimore, MD Lippincott Williams & Wilkins