

## **Effective Health Care**

# Diagnosis, Prevention, and Treatment of Dental Caries in Children and Adolescents Nomination Summary Document

#### **Results of Topic Selection Process & Next Steps**

- Diagnosis, prevention, and treatment of dental caries in children and adolescents was found to be addressed by an in-process update to a 2004 AHRQ report for the U.S. Preventive Services Task Force (USPSTF). Given that the in-process AHRQ report covers this nomination, no further activity will be undertaken on this topic.
  - Bader JD, Rozier G, Harris R, Lohr KN. Dental Caries Prevention: The Physician's Role in Child Oral Health. Systematic Evidence Review. Systematic Evidence Review No.29. (Prepared by the RTI International-University of North Carolina Evidence-Based Practice Center under Contract No. 290-97-0011.) AHRQ Publication, Rockville, MD: Agency for Healthcare Research and Quality. April 2004. (update in process) http://www.ahrq.gov/downloads/pub/prevent/pdfser/dentser.pdf
  - To sign up for notification when this and other USPSTF topics are posted, please go to http://www.ahrq.gov/clinic/prevenix.htm.

### **Topic Description**

Nominator:

Anonymous Individual

## Nomination Summary:

The nominator is interested in short- and long-term health outcomes for children and adolescents who do not get preventive and restorative treatment of dental caries. The nominator is concerned that lack of and limited access to dental care and poor oral health leads to infection; pain; and poor quality of life, school attendance, and learning ability. The nominator has identified low income groups, minority groups, children, and Medicaid recipients as priority populations.

**Population(s):** Children and adolescents (subgroups based on income and minority status) with dental caries

**Intervention(s)**: Prevention and treatment of dental disease **Comparator(s)**: No prevention or treatment of dental disease

**Outcome(s):** Improvements in overall health, rates of infection, pain, emergency department use, school attendance and achievement, all as a result of better oral health

## Key Questions from Nominator:

- **1.** Does the prevention of dental caries in children and adolescents reduce emergency room use for pain and infection?
- 2. What dental services should be covered for children and adolescents?

Topic Number(s): 0122
Document Completion Date: 6-30-09

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#### **Considerations**

- The topic meets EHC Program appropriateness and importance criteria. (For more information, see http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-researchtopics-chosen/.)
- This topic was found to be addressed by the 2004 AHRQ report titled *Dental Caries Prevention: The* Physician's Role in Child Oral Health. The key questions from this report include:
  - 1. How accurate is Primary Care Clinician (PCC) screening in identifying children ages 0 to 5 vears who:
    - a. have dental caries requiring referral to a dentist?
    - b. are at elevated risk of future dental caries?
  - 2. How effective is PCC referral of children ages 0 to 5 years to dentists in terms of the proportion of referred children making a dental visit?
  - **3.** How effective is PCC prescription of supplemental fluoride in terms of:
    - a. appropriateness of supplementation decision?
    - b. parental adherence to the dosage regimen?
    - c. prevention of dental caries?
  - **4.** How effective is PCC application of fluoride in terms of:
    - a. appropriateness of application decision?
    - b. achieving parental agreement for the application?
    - c. prevention of dental caries?
  - 5. How effective is PCC counseling for caries-preventive behaviors as measured by:
    - a. adherence to the desired behavior?
    - b. prevention of dental caries?
- An update of this 2004 AHRQ report is currently in process. This nomination will be forwarded to the USPSTF to provide input on the scope of the in-process update.

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