

Reconsidering Child and Adolescents Care Strategies in Dentistry School-Clinic: An Interdisciplinary Approach

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Received: 📅 December 01, 2020

Published: 📅 December 08, 2020

Abstract

During the coexistence of COVID-19 pandemic and with the oral health team furthest from the front line of care, mainly because of the increased risk of exposure and spread of this disease; care was more directed to emergency situations and emergencies. Most of the dentistry school clinics suspended elective care and there was a feeling of withdrawal, for the target public contemplated, especially when linked to public education, with free attention, in public universities in Brazil. The objective of this work was to describe a new look at the strategies for the reception of children and adolescents assisted in a clinic-school of a public university located in the northeast of Brazil. Strategy under construction, considering professors, students, patients, and those in charge. With the return to activities, in a hybrid way, it is expected to bring new approaches, with the necessary adjustments, to an inclusive, integral, and humanized attention.

Keywords: Oral Health; user embracement; coronavirus infection

Introduction

The concepts of welcome and well-being are essential and inseparable from the promotion of oral health, as they involve humanization and quality of care. By welcoming the patient, we allow the relationship and the creation of bond between the patient and the dental team. Welcoming generates humanized relationships between those who care and those who are cared for, assuring the concept of caring the sense of reflecting, thinking, being interested in, worrying, considering the other. Welcoming actions in dentistry can be considered crucial to improve the quality of the care provided and should be taught and developed during the training of the professional [1]. In this context, the moment of reception in dental care for children and adolescents, particularly in Brazilian university clinics, enables actions of orientation, desensitization, listening, clarification of doubts and a greater commitment of all those involved in the dynamics of this care, in order to achieve goals of changes to healthy habits and to favor better development and

quality of life of this target population. And empathy, affection and contact with the eyes, touch with the hands, hug, are very common demonstrations in this practice. Here is the record of the hospitality actions proposed at a public university in the city of Recife, northeast Brazil. These covered the listening and workshops directed by psychology professionals, reinforcing resilience and understanding or interpreting the reactions and behaviors presented and the needs of interventions found in children, adolescents and their caregivers, referred for dental treatment.

The reception also took place in conjunction with the phono audiology, occupational therapy and medicine team, in order to analyze these users in an integrated manner, in order to establish a "logistics" of integral approaches, guided by the priorities presented and specificities identified. How to work better the environment, even if not ideal, a positioning as appropriate as possible, in the dental chair, at the time of waiting. Oral health in

the context of the general health of the individual, being the playful very guiding of these strategies. When it seemed that reception was in the right direction, there was the OVID-19 pandemic. The COVID-19 pandemic posed a great challenge to dentistry, which confronted with the restriction of service and resource shortage. Transmission occurs primarily through droplet spread or contact routes. Due to the characteristics of dental settings, the risk of cross infection between Dental Health Care Personnel (DHCP) and patients can be very high, particularly in paediatric patients [2,3]. While the outbreak is active it is strongly recommended to stop the face-to-face exercise of dentistry. However, in cases of urgency and emergency, the care should be performed following protocols different from the usual ones. Social distancing, unique care with a decrease in the work team and reinforcement in the professional's personal protection equipment, is essential to avoid the spread of the virus. Another reality is the virtual screening, seen as essential for the performance of face-to-face care, since at least the patient must be classified as at risk or not and, in case of suspicion, enable a future diagnosis of COVID-19 by conducting a questionnaire on the last symptoms of the individual [4,5].

The paediatric emergency and non-emergency problems should be clearly distinguished and sufficient instructions provided in the special period of COVID-19. As emergency dental consultations were considered swelling, pain, and trauma with or without systemic symptoms [6]. These situations are more related to discomfort, to the need for invasive interventions. Children and adolescents who use dental treatment in Brazilian university clinics have gone through a long period of disaffection. Orientation and referrals to emergency situations, with a targeted screening process that, associated with distance and protection measures, leads to a feeling of impersonality. In view of the technologies and telehealth, the proposal is for channels of guidance, clarification, suggestion, and that make possible a new type of reception for children, adolescents, and their relatives or carers. Suggestions and

creativity are being worked on in groups with teachers, students, and technicians, concerned with a holistic vision and integrality in health. This group also includes the assisted users and their caregivers, so that they feel they are participants in the process of building a differentiated assistance, but with the recognition of the particularities, socio-cultural characteristics, experiences/experiences, exchanges, priorities, and expectations. Simpler and more direct messages and exchanges. This is a proposal that is being built. The first results comprise the orientation videos, the second moment is under construction, a channel for direct exchanges and continuous information. They are welcomed in this new concept!

Conclusion

Thinking about dental care for children and adolescents in the times of the OVID-19 pandemic is quite challenging. However, using technological resources, creativity and listening to all those involved, from an integrative perspective, new paths may be being implemented.

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DOI: [10.32474/IPDOAJ.2020.05.000208](https://doi.org/10.32474/IPDOAJ.2020.05.000208)



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