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Audit of the need and access to dental services in inflammatory arthritis patients

Author Block: Zoe Rutter-Locher, Nidhi Sofat, Musculoskeletal Research Group, Institute of Infection and Immunity, St George's University, London, UNITED KINGDOM.

Abstract:

Background: Inflammatory arthritides are chronic conditions which require a multi-disciplinary team approach to management. Rheumatoid arthritis is characterised by flares of joint pain, stiffness and fatigue and can progress to joint deformity and disability. This can affect an individual's ability both to perform everyday dental hygiene tasks and their ability to access dental services. Previous studies have found an association between gum disease and inflammatory arthritis, specifically rheumatoid arthritis. It is therefore important that patients with inflammatory arthritis have easy access to dental care and information on good dental hygiene. This audit aimed to assess the need and use of dental services in patients with inflammatory arthritis in an inner city tertiary hospital outpatient clinic setting.

Methods: Patients with inflammatory arthritis who presented to general rheumatology outpatients over a period of 3 months, were asked to complete a questionnaire. Data was then analysed using excel.

Results: 35 participants completed the questionnaire. F:M ratio was 7.75:1 and mean age was 51.8 (Range 24-84). 57% patients had rheumatoid arthritis, 15% had spondyloarthropathy, 14% had psoriatic arthritis, 11% had systemic lupus erythematosus and 3% had juvenile polyarthritis. There was a high prevalence of symptoms of gum disease with 29% reporting a previous gum infection, 31% reporting their gums bled recently, 40% reporting they could see more of the roots of their teeth than in the past, 23% reporting red gums and 23% reporting missing teeth (excluding wisdom teeth). 89% patients were registered with a dentist. 74% patients had been reviewed by a dentist in the last year. 80% patients brushed their teeth at least twice a day. However, only 49% flossed at least once a day and only 40% used mouthwash at least once a day. 4 of the 35 patients were awaiting treatment, 2 of these stated they could not undergo it due to cost constraints.

Conclusion: Most patients had access to general dental services and were registered with a dentist. Despite this, the use of dental hygiene methods such as flossing and using mouthwash was low and the prevalence of symptoms of gum disease was high. This highlights the need for increased awareness of dental hygiene in this cohort and access to specialist dental services. Future studies should aim to collect more quantitative data regarding status of gum disease and technique of dental hygiene methods.

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