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Paediatric Dentistry in Hong Kong
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Hong Kong which has been a Special Administrative Region of China since July 1st, 1997 when sovereignty reverted back to China, is situated on the southern coast of the Chinese mainland. It is composed of Hong Kong island, the Kowloon peninsula, the New Territories and 235 outlying islands giving it an area of 1075 km². The population is approximately 6,500,000 of which only 20% are under 14 years of age. The birth rate has declined latterly and is currently at the low level of 0.9 per 1,000 people.

Fluoridation of the public water supply commenced in 1961 at the level of 0.8 ppm and, based upon data and recommendations for temperate regions of the USA, the level of fluoride was raised to 1.0 ppm in 1967, it was subsequently lowered to 0.7 ppm in 1978. Following the gathering of clinical data on enamel fluorosis the level of fluoride in the public water supply was further reduced, in 1988, its current level of 0.5 ppm.

Contemporary epidemiological surveys have shown that 5 years old children have a dmft of approximately 2.4, also that there is a lack of dental awareness amongst the majority of their parents.

The 12 years old children have benefited from the effects of water fluoridation, because the mean DMFT value for this group has diminished from 4.4 in 1960 to 1.8. Among 15 years old children over 50% require oral hygiene instruction and scaling; indicating that parents do not attach a high priority to oral health. When treatment is sought, outside of the School Dental Scheme, it is invariably not in school time, so as not to compromise the children's education, which is considered to have a much higher priority.

ORAL HEALTH CARE FACILITIES

In order to practice dentistry a dentist has to either graduate with BDS from The University of Hong Kong, or to have passed the Hong Kong Dental Council licensing examination.

Private Practice

There are 1,501 registered dentists most of whom are in private practice. Relatively few offer general anaesthesia or sedation, although one or two hospitals do have the facilities for restorative care under general anaesthesia. Since the graduation of approximately 50 dental students per year from the Faculty of Dentistry commencing in 1985, there has been a trend for many of these new graduates to open dental practices at street level and in public housing estates rather than in high rise buildings in the commercial districts.

University

The Faculty of Dentistry is able to provide a wide range of dental services but only for a limited number of children, because patients, be they children or adults, can only be treated if they are of teaching interest for the undergraduate or postgraduate students. However, the Faculty does provide a specialist referral system and it conducts two sessions per week under general anaesthesia for the treatment of children with special needs or behavioural problems. In addition, there is an intra-mural private practice scheme which involves only the senior staff.

Government Dental Services

The Government has a policy not to offer comprehensive dental care, it aims to provide emergency care for the public, limited care for special need groups and in-patient specialist care in government Hospitals. Hence, any child who is in pain can seek emergency dental treatment at any one of the 12 specially designated Government dental clinics. Emergency treatment is also available at 44 dental clinics which are operated by voluntary organizations and charities. However, the dependants of monthly-paid members of the civil service are eligible for regular dental treatment at any of the 50 Government dental clinics. In addition, the Government operates a School Dental Service.

School Dental Service

In 1974, it was recommended that a School Dental Service (SDS) should be established by the Department of Health. Dental therapists commenced training early in 1978, prior to the active commencement of the SDS later in 1978. The aim of the SDS was to provide a basic form of dental care for all primary school children in Hong Kong, which was to include dental examinations, restorations, simple extractions and prevention, this has recently been expanded to include some Kindergarten children. The head teachers of the schools are invited to join the scheme, and then the parents are issued with application forms. The joining fee was originally HK\$5; this has now risen to HK\$20 (US\$2.6). Children aged 6 to 10 years respectively, are transported by bus to one of the seven SDS clinics during school hours, whereas children aged over 10 years are brought for dental care, on Saturdays, by their parents. The majority of the treatment is performed by dental therapists under the direct supervision of a dentist; more complex dental procedures are carried out by dentists, all eight of the Senior Dental Officers have postgraduate qualifications in paediatric dentistry. The first, and sole consultant in Paediatric Dentistry was appointed by the Department of Health in 1994.

An important adjunct to the SDS is the Oral Health Education Unit, which develops oral health literature, training schedules and organizes oral health campaigns within the community.

Since 1980, when the first children joined the SDS, the number of participants has risen steadily from 26,988 (29.4% of eligible children) to 400,000 (85% of eligible children). It is encouraging that such a high proportion of children are involved in the SDS. Although the statistics show that the mean number of dental appointments per child is 1.4 per year, the children at high risk are identified by screening exercises and assigned a high priority to receive the necessary treatment to render them dental fit.

Specialisation in Paediatric Dentistry

The Faculty of Dentistry operates three full- or part-time postgraduate courses in Paediatric Dentistry: a one-year Postgraduate Diploma in Dental Surgery, a two-year Master of Dental Surgery and a one-year Advanced Diploma in Paediatric Dentistry. The latter two help to provide the specialised clinical training component of the "3

plus 3" years training requirement of the College of Dental Surgeons, Hong Kong Academy of Medicine. The other three years being basic clinical experience.

The College of Dental Surgeons is finalising the formal training pathways in paediatric dentistry; the Faculty of Dentistry and the School Dental Service are recognised as training institutions. Arrangements for the exit examination are under way, while the immediate examination will be a conjoint examination with the Royal College of Surgeons of Edinburgh.

Currently, there are 23 people who hold higher degrees in paediatric dentistry and three with diplomas. Although there are seven holders of postgraduate qualification working in private practice, they do not all restrict their practices to paediatric dentistry. The others work in the School Dental Service, or in the Faculty of Dentistry. The majority of these dentists who have undergone formal training in paediatric dentistry have done so in Hong Kong; the others have been trained in the United States of America, the United Kingdom and New Zealand.

There is a need for specialised care which would be enhanced if there were more trained paediatric dentists, especially in the private sector, and if referral systems could be established in and between the various sectors of dentistry, because Paediatric Dentistry in Hong Kong has a sound professional basis and the clinical care is of a high quality. However, the expansion depends not only upon the profession but also upon the future demands and expectations of the parents of future generations of Hong Kong children.