

## **PRIMARY DENTAL HEALTH CARE AT BASIC HEALTH UNITS — DENTAL PUBLIC HEALTH PROGRAMME**

A system of primary health care is one of the element of the health system. It is the basic element upon which all the other elements are built. Primary Health Care is not an important aim in itself; it is the means to achieve better health, a step i the development and in the hierarchy of the health services. This outline is based upon 8 basic components of Primary Health Care i. e :

- a. Health Education
- b. Promotion of food supplies and proper nutrition
- c. Adequate supply of safe water and basic sanitation
- d. Maternal and child care, including family planning, and oral health care
- e. Immunization
- f. Prevention and control of locally endemic diseases
- g. Appropriate treatment of common diseases and injuries (including dental)
- h. Provision of essential drugs

Obviously all areas do not enjoy the level of the development or healthcare system, because in our society a limited number of privileged people and population mainly in Urban areas, are benefited from most of the available health care facilities, sophisticated and expensive equipment and treatment, involving most of the health resources of the country. With this system of primary health care which is to be provided in families of farmers or workers or general public with net work of facilities in health and Dental Health field, at the secondary and tertiary centre, this means an improvement. And credit goes to philosophy of the primary health care system, and the administrators who prepare guide lines for improvement of the situation. This is the real effort which is made to rationalized health expenses and activities to make dental health care available for entire population. The health worker / dental team needs certain training to fulfil obligation of Public Health.

### **OBJECTIVES OF THE TRAINING**

a. **Principal objective**

To improve the public health concept of the health personnel in communication of Dental Health Education, in order to enable him to be effective for assuming the task of communication and health education and dental treatment of individual, families and communities in the context of basic health unit care and dissemination of knowledge about modern preventive practices and surgical techniques.

b. **Specific Objective**

- (1) To identify the areas of needs of health personnels in communication for Dental Health Care in context of basic Health Unit Care System/Public Health Care.
- (2) To examine the existing level of ideas of dental health understanding and aptitude of oral health treatment or any person or institution already doing so and to determine their adequacy to the needs of the population identified.
- (3) To strengthen the teaching of communication/Dental Care Education in health personnels training at this training center in the above context by developing suitable teaching learning modules which can be adopted to the local needs.
- (4) To develop the close collaboration within the health sector by the dental manpower to become responsible through training for management of dental public health.
- (5) Through such areas of training, the concept of primary health care, community organization understanding cultural values and their effect on dental health.
- (6) The education of the families in the villages in practice of oral health discipline towards healthy living. For prevention of dental

disease, ill health and mal-nutrition, in relation to Maternal and Child Health.

Such factors Fibrous food and uncivilized diet are important to develop the jaw in proper order “U” shaped and good teeth in order to enable food to be well chewed and prepared for digestion and absorption, because when teeth are missing or diseased, it is impossible to chew the food properly and proper development of the jaw is delayed because good sound teeth and well developed jaws are important for health, appearance and speech.

The WHO accepted goal of health for all in 2000 it concerned the oral health as well. World wise experience has shown that there are many good preventive and curative methods in Dentistry and provided their use, a significant decrease in oral disease occurs.

### **PROBLEM IDENTIFICATION IN ORAL HEALTH**

To aid the BHU/ PHC it is the most important task, that a criteria needs to be established for selection of the problems, as mentioned above according to the local situations, in relation to cultural patterns, economic status and family set up. The oral health problems are of emergency nature, and there is a need of target for prevention among the children, young and the aged. The families and all types of workers need attention.

In all the types of services i.e. preventive, curative, educative, referral, there is comprehensive need to have other kind of knowledge of socio-economic problems confronted to population. Because the prevention of disease depends upon understanding of the etiology and natural history of the disease without knowledge on scientific basis, it is not unreasonable to suggest anything for prevention of dental caries or periodontal disease or oral cancer to the population.

The dental and periodontal tissues are part of living body and necessity of the knowledge is valuable in subjects of Anatomy, Physiology, Pathology, Bacteriology, Medicine,

Surgery and dental surgery, therefore the treating & prevailing of the dental diseases there is need of elaborate curriculum for educational values to the dental surgeon.

### DENTISTRY IS A BIOLOGICAL SCIENCE

Dentistry is also a biological science, when the healer is introduced to the patient, through learning the art of diagnosis or technical procedure, there are certain common conditions and uncommon conditions, which can guide for research reforms of science, so in such circumstances, where complete dental treatment is not provided but many advanced nature diseases are present. The doctor can go for making some studies and this shall increase his status and research. The dental graduate is fully aware of: -

- a. Knowledge of dental diseases
- b. Skill to handle the dental problems
- c. The attitude of Dental Hygienist for research and community social service

For each programme effectiveness depends upon the team of the workers, their knowledge, attitude and social behaviour. For making a programme more successful and achieving objectives mentioned above and strategy.

A community dental health worker (Dental Hygienist) is to be included in these schemes for interrelation or oral health with general health policies. This personnel under the supervision of dental officer will carry out the preventive work and curative therapy of minor nature. For me a doctor is a leader of a team to execute the policies of the Government, and checking the responsibilities of each component of health scheme.

The doctor should identify certain diseases for overall health policies formulation and solving of the major proportions through conciling the meaningful decisions, but rest of the school groups, mothers, teacher or religions leaders or local workers and discussion for preventive education through the use of dental auxiliaries.

## **TRAINING PROGRAMME OF DENTAL DOCTORS**

At present in 29 districts and 89 tehsils dental officers are providing the dental health services, according to present planned system as an integral part of health system for a community. The Rural Health Centres (RMC) so far are expected to be provided with a oral health care programme in future. After this provision at RHC the services to the communities for dental health care shall become of great value, with easier approach, both of the area, community and by the BHU as a referral cases. Since presently we had to provide preventive care and emergency care to the population at the BHU. Therefore training to the dental officer as leader of the team. For example, accidental trauma to an infant or young child is very common in the rural population, and to handle such accidental situation, relating to the oral cavity in knowing the extent of the dental injury, evaluation for the treatment of immediate nature or for referral purposes, is essential.

Pain is a common feature and removal of pain is only possible effectively, by knowing the cause, and to know a cause, there is a need of better study, in a more scientific way syllabus.

1. Reviewing of dental anatomy, Physiology, Pathology and Bacteriology.
2. Etiology of dental caries and its prevention and identification & measures for relief of pain associated with caries.
3. Etiology of periodontal diseases, prevention, classification, relief of pain & bleeding associated with it.
4. Dentofacial Articulation, pain T.M.J, old cases of dentofacial trauma and injuries to the Jaws and their management.
5. Oral lesions etiology, identification, prevention social aspect of these.
6. Overall preventive measures, (Miswak technique, brushing and modern therapies, Fluoridation, school health services and religious gathering).

Practical training, knowledge regarding instruments and handling the same for identification of oral health problems for process of relieving of pain and other immediate problems of: -

- a. Managing oral health problem in a separate office.
- b. Keeping record of such problems for collection of data.
- c. Use of various medicaments and prescriptions.

The ability of the dental health care physician is to cope with the patients for the immediate problems in Oral Health, he will confirm to the expectations of the programme. Because there is no real substitute to patients by better understanding and proper handling by the doctors. The doctors level of intelligence, personality to a problem, in solving the situation will be an achievement. Because in the beginning, patients will not be motivated, his first suggestions and approach might not architect the confidence of the people because of the customs and prevailing system in society. It will depend on the doctors, in solving the health problems, which will bring a special significance in achieving the target of minimizing the disease because all such efforts of the doctor, Government financing agency, health team, and the public will contribute to consolidation of the initial interest of the patients, and the family which has brought them to the office or surgery or basic health unit, even for simple pain relief.

### ORAL HEALTH MEASURE

Many rural children, according to many studies have poor and reduced ability to concentrate, for a few moments on the Dental Health Care. The results of these habits and customs, the oral Hygiene of the rural population stands poor, with heavy accumulation of plaque and calculus. Many among them, might not be able to manage tooth brush once in life or they could restrict to rinse their mouth and use the fingers. Few people do use the stick/ Miswak/bark of the tree. But most of them are free of this habit of cleaning the teeth.

Old Dietary habits are particular importance as the rural population has developed, the taste for modern sweets and drinks and other forms of the modern foods which are causing gingival and caries to the development and other oral disease. So far, oral hygiene practice as simple as possible is their need. The oral cleaning after each food is reasonably effective, if being carried out at least once a day or twice a day and thus there is a need to arrange for oral health measures designed for specific degrees of the rural population by dentist.

So, Dental Public Health is a broad spectrum to minimize the disease. It creates awareness among the people. On it gives exact pictures to explain the situation to the gums and helps in research and precaution for future.

### **Role of Dental Officer in a Community**

The behavioural management of the dental officer is also of the major significance, clearly a sympathetically concerned dental officer for the welfare of the child or that of the family will have a considerable advances of opportunity of reliance and confidence of the population.