



AN OVERVIEW NURSES-PHARMACIST ROLES IN DENTAL CARE COLLABORATED WITH THE DENTIST IN PATIENT EDUCATION

Ahmed Khaled Damanhour^{1*}, Khalid Abdullah Al-Ansari², Yasser Saeed alzhairani³, Eman
ali baokbah⁴, Zohier Omar Kabeer⁵, Abdulkhaleq mohmad abdullh alzhairani⁶

Abstract:

Comorbidities and the use of several drugs are common among dental patients, and some of these medications may have an effect on the oral health and treatment they get. When it comes to a dental patient's dental visit and general health, a pharmacist working in a dental clinic can provide assistance with the collection, documentation, and review of the patient's medication history. By conducting comprehensive health and medication histories and maintaining open lines of communication with dental and medical professionals who are involved in a patient's care, pharmacists and nurses have the potential to play a significant role in a dental practitioner's office.

^{1*}Pharmaceutical Technician, Managing supply chains at the Makkah Al-Mukarramah Health Cluster

²Nursing technician Managing supply chains at the Makkah Al-Mukarramah Health Cluster

³Dentist at East Jeddah Hospital

⁴Nurse technician, MOH JEDDAH

⁵Nursing technician, King Fahad General Hospital

⁶Nurse technician, Gilwah general hospital

***Corresponding Author:** Ahmed Khaled Damanhour

*Pharmaceutical Technician, Managing supply chains at the Makkah Al-Mukarramah Health Cluster

DOI: 10.53555/ecb/2022.11.7.59

Introduction:

Because of their extensive expertise and easy accessibility, community pharmacists have long been considered the drug specialists of the health care team. As a result, they are regularly called by members of the general public as well as other professionals for answers to problems about patients' health. It can be difficult for pharmacists to stay up to date in today's information-driven environment since they are continuously being inundated with fresh information on hundreds of different pharmaceuticals, including prescription medications, nonprescription medications, and dietary supplements [1].

In light of the fact that primary dental care services are being provided to the general public by professionals, the role of the pharmacist in oral healthcare has become increasingly important. By virtue of the fact that they are the major source of information for a large number of patients in developing countries, pharmacists are in a position that is truly exceptional when it comes to the dissemination of information on oral health. There are many different methods in which a community pharmacist may play an active role in the prevention of oral diseases, as well as in the identification, evaluation, and referral of patients. They are able to approve the advice that is offered by dental professionals, despite the fact that they are unable to take over the work of dental professionals [2]. The nature of dental illness, the need of preventing it, and the significance of maintaining regular dental examinations and treatments are all topics that pharmacists may highlight. Community pharmacists have the potential to play a more significant role in oral health care if they get assistance and instruction from dental practitioners, according to the findings of a research that examined the advice, products, and information that they give regarding dental care. In addition, several studies that were based on the findings of the study emphasized the need of providing pharmacists with training in order to obtain information on dental treatments that are accessible. The findings of a third research [3,4,5] showed the need of incorporating pharmacists within a multi-disciplinary oral healthcare team because of their expertise.

The health care systems of many nations are significantly dependent on the capacity of the general population to self-diagnose certain conditions and symptoms, as well as to successfully and affordably treat them with the nonprescription drugs that are now accessible. Due to a lack of time and the difficulties in scheduling an appointment

with a physician or dentist, it is standard practice for many individuals in Saudi Arabia to seek assistance from community pharmacists addressing common medical and dental issues [6].

Review:

One of the most important aspects of the National Health Service Long Term Plan is the delivery of an integrated healthcare system. One of the obstacles that has been highlighted as preventing the promotion of this strategy is the absence of interprofessional education. Access for patients is improved as a result of the creation of primary care networks, which stimulate the formation of service alliances between general practitioners (GPs), pharmacists, and other community sectors. The possibility for a multidisciplinary approach to the promotion of oral healthcare in the community environment is opened up as a result of this information [7].

Primary care dental teams, which sometimes operate in isolation, now have the chance to become completely integrated within the healthcare system by addressing oral health concerns. With the objective of becoming increasingly integrated into the larger NHS, the Long Term Plan for the National Health Service (NHS) specifies the aspirations to increase the clinical role of pharmacy professionals. The key to success is establishing connections between different fields of study and ensuring that oral healthcare is approached in a consistent manner. In this work, we investigate whether or not learning together may be a means of facilitating these connections [8].

In the past, there has been considerable emphasis placed on the collaboration between dental experts and pharmacy specialists. It was in 2016 that the Pharmacy Integration Programme was launched with the purpose of accelerating the integration of pharmacists across all health and care management systems. In 2018, NHS England and NHS Improvement demonstrated their dedication to a more integrated approach to dental treatment by incorporating specific criteria for children's oral health training and evaluation into the national community pharmacy quality plan. This was done in order to demonstrate their commitment to a more comprehensive approach to dental care. In order for the plan to fulfill the quality requirements, it was necessary for eighty percent of the pharmacy personnel to successfully complete the children's oral health training and evaluation offered by the Centre for Pharmacy Postgraduate Education

(CPPE). When it comes to children's oral health, the CPPE has created a gateway portal that provides access to learning and e-learning opportunities for all pharmacy professionals [9].

According to the oral health plan and research about the incorporation of oral health care into primary care and pharmacy, an increased amount of training in oral health care is something that pharmacists would want to have. In addition, they demonstrate that there is a distinct absence of coordination and integration with other healthcare providers at the present time. In order to investigate the possibility of integrated training for dental and pharmacy professionals, this was regarded as a barrier to collaboration on oral health promotion and informed conversations between Health Education England (HEE) Midlands and East dentistry colleagues and East Midlands pharmacy professionals from CPPE [10].

There have been research conducted on interprofessional learning for undergraduate students, namely in the fields of medicine, nursing, and pharmacy. These studies have demonstrated that students who get training with other healthcare professionals experience an impact on their clinical decision-making abilities. At this time, there is a limited amount of collaboration between undergraduate students studying dentistry and pharmacy. Students in the fields of pharmacy, medicine, and nursing said that they thought that shared learning helped them develop their cooperation abilities and will help them boost future professional relationships by better understanding each other's responsibilities [11]. These findings were based on studies that were conducted on shared learning.

Opportunities for patients to benefit from collaboration between dentists and pharmacists, as well as novel approaches to enhancing health outcomes connected to oral care, are made available through this collaboration. A dentistry clinic that was run by students at the Creighton University School of Dentistry gave pharmacy students who were participating in an Advanced Pharmacy Practice Experience (APPE) rotation in ambulatory care the opportunity to perform pharmacy-related services during dental appointments. Staff members, faculty members, students, and patients all expressed a positive attitude about the presence of pharmacists at the dental office. Because they are specialists in medicine, pharmacists have the potential to play an important role in dentistry clinics. They are able to

provide comprehensive health and medication histories, as well as give appropriate drug advice to both patients and those who provide care. A study that was published in the *International Dental Journal* demonstrated that a pharmacist-led intervention in a dental practice led to a reduction in the number of medication discrepancies and medication omissions. The study found that the mean number of medication discrepancies decreased by 37.5% ($P < 0.001$) and the frequency of undocumented medications decreased by 41.3% ($P < 0.001$) between phase 1 and phase 2 of the study [12].

Conclusion:

Professionals in the fields of dentistry and pharmacy have a strong desire and interest in learning from and with one another. As far as patient care is concerned, there are distinct areas of practice in which both professions are participating. At the moment, neither profession is shown a whole picture; rather, they are simply shown their compartmentalized interactions with the patient. By enhancing the patient experience through collaborative learning, we may better facilitate the overlap of the contributions made by each profession. The results of this evaluation of two workshops demonstrate that the concept of interprofessional co-authorship is beneficial in developing learning for two different healthcare professions, hence creating a chance for learners from both professions to learn from one another. In order to guarantee that the learning that took place in the small groups was really diverse and that the narrative promoted interprofessional collaboration and learning, this is supported by interprofessional co-facilitation activities that took place throughout the workshops. With the benefit of hindsight, one of the limitations of this study was the lack of specificity in the information collection process for Workshop A. This was due to the fact that the questionnaire did not ask participants to specify their occupation. It is possible that the collection of these data might provide a more comprehensive understanding of the potential advantages of interprofessional learning for dentistry and pharmaceutical professionals if this study were to be replicated in the future. However, despite this constraint, the findings of this study demonstrated that active learning and conversations in small groups altered the way in which the professionals collaborated with one another. Through the investigation of common problems and the investigation of individual patient instances, a model that is functional for the future was built.

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