

Improving the Oral Health of Children and Youth with Special Health Care Needs

by Lewis First MD, MS, Editor in Chief, Pediatrics



Improving the oral health of children is a national priority for dentists and pediatricians. While we should be establishing a "dental home" for our **patients by age one**, this is challenging because of many factors, including limitations in dental resources. Children and youth with special healthcare needs (CYSHCN) are at high risk of dental problems. How does the oral health of CYSHCN compare to those without special health care needs (non-CYSHCN)? To answer that question Lebrun-Harris et al ([10.1542/peds.2020-025700](#)) analyzed data from the 2016-2018 National Survey of Children's Health, which included 75,612 children between 1 and 17 years who were non-CYSHCN and 23,099 CYSHCN of similar ages. The authors estimated the prevalence of oral health problems and their receipt of preventive oral health (POH) services in the year prior to being surveyed. They also studied factors that affected better or worse receipt of POH services for CYSHCN.

The findings from this study are fascinating and concerning at the same time and will likely surprise you. For example, a higher percentage of CYSHCN received a POH visit in the prior 12 months than non-CYSHCN children (84% vs 78%). The surprise is that despite more frequent POH visits, CYSHCN had higher rates of oral health problems like decayed teeth and cavities than non-CYSHCN.

So why this interesting pair of findings—more frequent preventive care but worse dental problems among CYSHCN? We invited Drs. Jacqueline Burgette from the University of Pittsburgh and Donald Chi from the University of Washington to share with us their take on this study in an accompanying commentary ([10.1542/peds.2021-050886](#)). They remind us that factors play a role in the paradoxical findings including the possible higher amount of dietary sugars in the diet of CYSHCN, less use of fluoride toothpastes, the duration that food may stay in their mouths, poorer oral hygiene practices, and even the sugar-contained in liquid medicines taken by these children. Drs. Burgette and Chi sound a call to action to not just focus on enhancing availability of dental services, but to also focus on social and behavioral interventions at the home, office, and community level that will narrow the disparities that are worsening the oral health of CYSHCN. Both the study and commentary don't just identify the oral health problems of CYSHCN but offer solutions that are well worth reading and then sharing with families and community advocates for these children. Link to both articles and think what more you can be doing to improve the oral health of CYSHCN.

- [Promoting Oral Health in Childhood: A Quality Improvement Project](#)

AAP Journals & Periodicals

- [The Role of Pediatric Trainees in Addressing Oral Health Disparities in Children](#)
- [Maintaining and Improving the Oral Health of Young Children](#)
- [Facebook](#)
- [Instagram](#)