

# Changing colours

**Maura Haran** reveals how the Irish Society for Disability and Oral Health is taking steps to change perceptions in special care dentistry

## What are services currently like for patients with disabilities in Ireland?

It's mixed, really. At the moment there's an overhaul of dental services being developed – an oral health action plan is currently in the initial stages of development, which will focus initially on adults who are most urgently in need of improvements to accessing service and care.

We greatly welcome that as a society and we hope to work with this policy to improve services across the board for people with disabilities. So, while the recession has hit everything hard in Ireland, we do see a great future: a comprehensively planned service that will ensure oral health for people with disabilities remains a big priority.

## What role do the ISDH play in providing this care to patients with disabilities?

Our biggest role is providing education through continuing professional development – we're probably the primary source of communication for special care dental



From left to right: Dr Maura Haran, Dr Grace Kelly, Dr Alison Dougall, Dr Emma Corrigan, Dr Danielle McGeown, Dr Siobhan Stapleton and Dr Caoimhin McGiolla Phadraig at the International Association for Disability and Oral Health Biennial Congress in Berlin last year

education outside of dental hospitals in Ireland. Our conferences and spring lectures are completely special care focused.

I think that's our most important role.

We are also in the early stages of planning our conference on the 19 June, which will focus on the spectrum of patients with special care needs.

In my opinion, a lot of people who are

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Dr Emma Corrigan won an award for her presentation on special care dentistry

considered challenging to treat simply are actually the ones being challenged - by the dental setting. Therefore, we should be trying to recognise and address the psychological, sensory and physical challenges they experience if we are to meet their needs.

So the focus in next year's conference will be trying to understand the perspective of the person with special care needs who can't effectively communicate their feelings verbally or in other ways. I think this is an area that we need to develop. If we understood those patients better, we wouldn't always need to resort to sedation or general anaesthetic as much as we do.

We also provide bursaries every year, sponsored by the Dental Health Foundation, which promote research and development in the field of disability and oral health. Beyond that, we submit any information we can to support any policy developments.

## So what disabilities fall under special care dentistry?

That's an issue, too. What defines special care dentistry? A disability can range from intellectual, physical, mental health, medical and social problems, and people in residential care.

The whole spectrum of disability is very broad and certainly many people can be treated in mainstream settings. Special dentistry, in my mind, is for those people who aren't suitable for mainstream care because they're not able to tolerate it, or may require more specialist input.

I think it's important not to categorise everybody with a disability as needing special care dentistry – the idea is that as

many people as possible should be treated in the same way as everybody else, and not stigmatised. Special care dentistry is mostly just basic dentistry – it's nothing extraordinary, the main issue is helping people tolerate the treatment, and I think that's where we fall down. We need to understand people better, and by doing that, make things easier for our patients.

Intellectual disability, autism and dementia are probably the patient groups that presents the most challenges for special care dentistry, and also for home oral care. The vast majority of people with mental health issues can be treated in the mainstream setting. The biggest problem is their maintenance of oral home care, as oral hygiene may not be a priority. Again, the majority of older people can be cared for by general dentists.

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## What is at the top of the agenda for the Irish Society for Disability and Oral Health (ISDH)?

We hope to work with the new national oral health policy (currently in progress) in any way we can, through education and training, and provision of consultation advice primarily in relation to people with disabilities.

Keeping that in mind, we have our spring lecture on the 5 March, which will be a joint presentation looking at ageing and its implications for general and special care dentistry in Ireland. It'll focus on older people and their varying service needs related to their level of dependency.

It is important to point out that just as not all people with disabilities, such as intellectual, physical or mental disabilities necessarily require special care dentistry, neither do most older people.

A lot of it can be provided through mainstream dentistry – but we are keen to help progress the services in relation to those people who are currently most disadvantaged with regards to access to the best services and care.

## How available is special care dentistry in Ireland for those who need it?

Services have certainly improved considerably in the past 20 years. When I started in special care dentistry, there were limited services for people with disabilities – when somebody had a problem, they were referred to general anaesthetic, had their teeth out, and that was that.

It's come a long way since then. There is some inequality of access at the moment, primarily related to staffing issues – there has been an embargo on HSE recruitment. We're hoping, as part of the new national oral health policy, that the spread of services country-wide will be taken into account. Variable access to general anaesthetic facilities is also a concern, which we have previously highlighted.

## How does working with other dental organisations help to change perceptions for special care dentistry?

We recently had big representation at the International Association for Disability and Oral Health (IADH) congress in Berlin last October. We had 10 presenters from the Irish delegation. It was the second highest contribution by any country to the congress!

It went down very well; one of our presenters, Dr Emma Corrigan, actually won an award from the IADH!

## What do you hope to achieve in your time as president of the ISDH?

I would like to increase our membership, and I would definitely like to encourage not just dentists but professionals from other disciplines within dentistry to become members as well.

The number one thing I would be very keen to do is help in the development of the oral health policy. I'd like to ensure that we assist in any way we can to improve services for people with disabilities, so that they're prioritised as much as possible. We will advocate for more structured services for people with disabilities and better access to care. That is my main concern. **ID**

Comments to *Irish Dentistry* @IrishDentistry

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