

Letter to the Editor (Pages: 18077-18079)

Oral Health Change in Iran: Part V; It Is the Time to Focus on MIH by an Electronic Approach - Letter to the Editor

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Abstract

Periodic data for determining the DMFT index in 12-year-old children showed that the index had a significant improvement in different periods of its measurement during 25 years after the integration of oral health services in primary health care and was relatively stable. In order to improve this index, it is necessary to provide electronic care and services based on risk assessment of dental caries and attention to MIH in the primary health care systems.

Key Words: DMFT index, Electronic oral care, Molar-Incisor Hypomineralization (MIH), Primary health care services.

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Dear Editor

Oral health care was integrated with the Primary Health Care (PHC) system over 25 years ago. The oral health services integrated with PHC include healthcare training, screening of target groups (mothers up to one year after labor and children up to the age of 12 years), fluoride therapy at the first service level in healthcare centers, and referral to get second-level services in comprehensive health service centers including scaling and Prophylaxis, fluoride therapy, fissure sealant therapy, tooth restoration, and the extraction of non-savable teeth. The supplementary programs were designed and implemented with the inter-sectoral cooperation of the Department Education for the oral health of students and with the State Welfare Organization for the oral health of children in kindergartens. Data shows that DMFT, which stands for Decay, Missing, and Filled Tooth and is an indicator of the effect of decay on teeth, was in the range of 2.02-4 before 1995, i.e., 20 years before the integration of oral health with the health network system as PHC, whereas it was estimated at 1.5-2.02 at different measurement periods 25 years after the integration (2).

Considering the success of the services designed in the PHC system in controlling dental caries and reaching stability in its rate, it seems that the time has come to follow the recommendations regarding the use of new technologies in PHC and investment in this area (3), so we can hope for further improvement of this index through using new technologies, reengineering services, and defining new electronic services along with maintaining the results obtained.

Disorders like Molar-Incisor Hypomineralization (MIH) emerge essentially when controlling dental caries, because these disorders rapidly develop into wide caries in the area with a high prevalence of dental caries; and, therefore, are diagnosed as dental caries. Research across Iran confirms the existence of MIH. Given the experience gained during the COVID-19 pandemic regarding caring, triage, and referring the patients by telephone and electronic link (4) and its effectiveness in its control on one hand and the readiness of the health system in implementing electronic education and caring services (5) on the other, distance oral health cares can be improved by launching electronic oral PHC network with the motto of 'each house a virtual health center' to identify the teeth suffering from MIH, Early Childhood dental Caries (ECC), and other oral disorders. Obviously, it has offered a high potential for self-care based on the measurement of the disease risk level, imagery screening examinations, dental bacterial plaque control care, control of gingivitis during pregnancy, improvement of brushing and flossing methods, nutrition analysis to establish non-caries nutrition, issuing an electronic referral form for receiving treatment comprehensive healthcare service centers with dental units, and identifying high-risk nodes in deprived and underprivileged areas in order to send mobile dental clinics to improve access to dental services and take timely action for MIH-affected teeth.

The MIH-suffering Dental Registration, Care, and Treatment Center was registered with the ethical code ofIR.ARUMS.REC.1402.089 as a pilot center for electronic oral health services to electronically diagnose and take care of these teeth and issue an electronic referral form to receive the required services and implement the test. This pilot study has not started yet, but it is considered as a need in the field of oral health, which is mentioned in the title of this article. The Center is ready to make agreements with other scientific centers on joint actions in this respect to help save permanent first molar teeth, which are the teeth mostly influenced by dental caries in the DMFT index.

CONFLICTS OF INTERESTS

None.

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