

## Research Article

# The Dentist Importance as a Transformation Agent in Public Health

Davi Neto de Araújo Silva<sup>1</sup>, Amanda Felix Gonçalves Tomaz<sup>1</sup>, Natalia Teixeira da Silva<sup>2</sup>, Cristiane Lorena Maia Pinheiro<sup>3</sup>, Marcela Letícia da Silva Azevedo<sup>3</sup>, Angélica Kercya Pereira de Mendonça<sup>1</sup>

<sup>1</sup>DDS, MS, PhD Student, Federal University of Rio Grande do Norte, Brazil

<sup>2</sup>DDS, Post Graduate Student, Federal University of Rio Grande do Norte, Brazil

<sup>3</sup>DDS, MS, Federal University of Rio Grande do Norte, Brazil

**\*Corresponding author**

MS. Davi Neto de Araújo Silva, University of California (UCLA), School of Dentistry, 10833 Le Conte Ave. Box 951668, Los Angeles, CA 90095-1668, USA; Email: davinetoaraujo@yahoo.com.br

**Submitted:** 26 June 2020

**Accepted:** 07 July 2020

**Published:** 09 July 2020

**ISSN:** 2333-7133

**Copyright**

© 2020 de Araújo Silva DN, et al.

**OPEN ACCESS****Keywords**

• Dentists; Dentist-Patient Relations; Public health

**Abstract**

The dentist performance within public health represents an important advance in the complete and interdisciplinary plan for the prevention, promotion and health recovery, whether in public or private networks.

**Objective:** This study aims to reflect and discuss the real dentist importance for the public health within this professional activity field, understanding that dental care goes beyond what is realized in the mouth. In addition, to analyze these professionals' roles and their actions impacts on the health quality of those who receive their care.

**Methods:** A literature search was performed in electronic databases PubMed and Cochrane Library, including articles published in scientific journals. Two researchers performed a critical analysis about the articles selected for inclusion.

**Results:** 11 publications were selected. In both references consulted, there was a consensus regarding the indispensable dentist presence in the prevention and health promotion process. In addition, the dentist inclusion in the public health network, via government health strategies, only reinforces the need for valuing these professionals.

**Conclusion:** The collectively dental services provision not only promotes oral health, but also enables the health quality improvement in an integral way.

## INTRODUCTION

The dentist importance in the public health is observed when we see its indispensable presence in the plan for prevention and promotion health, whether in public or private network. Are questions pertinent to this research, among others, what benefits can the dentist bring to health in addition to oral health? Or even, how can the dentist, whether in a public or private network, contribute to public health where he works?

When we think of the word health, we immediately refer to ideas such as the disease absence, well-being, medical assistance, among others. However, far beyond this initial conception, there is the fact that to be healthy, countless biological, social and cultural factors are in force. Among the social factors, there is the professionals multidisciplinary who prevent and promote health. That is, not only doctors and nurses, but also dentists, physiotherapists, and nutritionists can also contribute directly in this regard. Emphasized in this work, the dental surgeon role becomes much broader when we understand that in addition to treating isolated teeth, he treats a human being completely.

When looking for literary sources on this theme, we constantly find the dentist important presence as a fundamental

part of the governmental health strategies in force. The oral health team, although inserted only in 2001 in this family health program context, presents itself as an integral and important part for the population's health [1]. In this sense, the National Oral Health Policy proposes the progressive incorporation of health promotion and protection actions, such as drinking water fluoridation, health education, supervised oral hygiene and topical fluoride applications. Except for water fluoridation, the other actions are related to the dentist's role as an actor in this process.

Based on this, the present study has as main objective to analyze the dentist importance and to discuss his contributions to public health through his performance. It is desirable that, at the end of this analysis, the reader can recognize the real need of the dentist to achieve a comprehensive and effective panorama to prevention, promotion and health protection.

## LITERATURE REVIEW AND DISCUSSION

### Study selection

An electronic search was conducted from the PubMed ([www.ncbi.nlm.nih.gov/pubmed](http://www.ncbi.nlm.nih.gov/pubmed)) and Cochrane Library ([www.cochranelibrary.com](http://www.cochranelibrary.com)) databases. Two researchers critically

analyzed the works selected for inclusion. As a search criterion, the words “dentists”, “dentist-patient relations”, “public health” and “collective health” were used.

The search for health has always permeated man’s life since historical civilizations, since it depended on his willingness to fight, hunt and survive. The healing rituals practice, infusions preparation and restorative recipes, among others, were part of the daily primitive man life and his entire caste.

The same behavior could be observed in future ages and has continued until today. Health is a fundamental and indispensable right for each living being and, as in prehistory, it needs to be maintained and preserved so that man can perform his activities fully [2].

This fact is immutable and permanent, because without health there is no life. However, because to the natural human being evolution and the modernity growing advent, health has come to be something complex, broad and, for this reason, has gained new care strands.

Among these, we mention the several professions emergence designed to treat the human body health. In addition to the numerous medical specialties that work in specific body areas, over the years we have had the professional areas birth apparently restricted to certain parts of the body, but both contributing to the general state health achievement. One of these areas is Dentistry.

We know from historical sources that ancient populations have always been concerned about the teeth health. Not necessarily because they want to keep them in their mouths, but mainly because of the fear with possible diseases triggered by oral infections. In addition, the resources scarcity and knowledge absent at the time helped to characterize Dentistry as mutilating and not restorative [3].

Because to the knowledge deep and the growing impact of technology in this area, Dentistry today has changed its operation form and has come to be considered a basic and indispensable requirement for obtaining and maintaining health. The expression “health begins with the mouth” has gained strength and, despite the exceptions, reflects the thinking of a generation more concerned with oral health than it has been for some time.

While changes have occurred in the individuals thinking, there has also been scientific progress regarding the relationship established between oral health and body health. The correlation between oral and systemic diseases has been studied extensively. Researchers have investigated the mechanisms by which bacteria present in the oral environment contribute to a systemic infection. Numerous epidemiological studies have assessed the association belong oral diseases and conditions number, including atherosclerosis, diabetes, obesity, leukemia, pregnancy complications and smoking [4].

Da Cruz Otávio et al. [5], mentions that “new investigations in science continue to evidence the theory that the mouth would be a infection focus by bacteria that could affect distant structures”. Both authors cited agree to associate some systemic problems with the existing oral condition. Today, more than ever, the relationship between the oral environment and other bodily

diseases is proven. As mentioned above, diabetes and some cardiovascular problems, among others, maintain a close link with the oral tissues care.

This fact only reinforces the dental science breadth and, consequently, the plurality dentist performance. Thus, the presence and dentist performance are more than necessary when it is desired to promote health. In addition to the benefits already known from the dentist’s action in promoting dental and gingival health, this professional can and should also be considered an active agent to fight diseases and social problems. From their academic education to their entry into the job market, they are often subjected to the most diverse social situations, many of them precarious, with public health being the main reflection of this. In this sense, Lucietto [6], mentions that “[...] training in Dentistry aims at the knowledge development, skills and abilities on the part of future dentists with a view to serving individuals and communities.”

From the first university period, dentistry students already experience the harsh public health system reality that is not always able to assist the entire population. In many situations, oral problems become irrelevant to other health problems. And it is at this moment that the dentist, still in training, performs his critical exercise of observing this sad social reality and trying to change it.

Taking this baggage from his academic training, in addition to the necessary theoretical and practical knowledge, this professional find himself inserted in a more comprehensive context about care with collective health. Being able to see a patient and observe him beyond his oral problems is proof that the dentist is more than prepared to collectively promote health.

Going beyond the dental office limits and promoting health in fields beyond these limits, became real and concrete in countries as Brazil through government actions that included the oral health team in the family health program.

According to Manassero et al. [7], the National Household Sample Survey, conducted by Brazilian Geographic and Epidemiology Institute in 1998, proved that about 20% of the Brazilian population had never consulted the dentist. For this reason, the family health program was created with the objective of increasing the population’s access to oral health actions.

From this fact, a range of options was opened for the work of Dentistry professionals through the Public Health System. In addition to the possibility of working in public health posts, whether on a municipal, state or federal scale, it was also possible to strengthen their ties with other professionals in the primary care network, such as doctors, nurses, psychologists, etc.

The different health areas combination, operating in the same area, only reinforces and respects principles such as the integrality and universality. As a patient finds a multidisciplinary team committed to preventing, promoting and protecting their health, there is also an immense benefit for professionals such as dentists who gain experience and can talk to other areas about the different health conditions observed.

From the oral follow-up of pregnant women, through instructions to developing children, and extending to the care of

systemically committed adults, the dental surgeon presence in public health is no longer necessary and has become vital in this process.

When this professional is seen in his potential to modify and shape people's health, recognition is no longer subjective and becomes a reality. Understanding that being a dentist is much more than extracting or restoring teeth is the ideal thought sought by each of these health workers. Now when the population assisted by them obtains this conception, a great step is taken in the valorization and this profession recognition.

The specific dentist duties in the public health are, among others, to carry out an epidemiological survey in the oral health area of the population enrolled; perform the clinical procedures defined in the basic operational standard of the Unified Health System and in the basic operational health care standard; carry out comprehensive treatment, within the primary care scope for the enrolled population; forward and guide users with complex problems to other assistance levels, ensuring their follow-up; perform first-aid care in emergencies; perform small outpatient surgeries; prescribe medications and other guidelines for the conformity of the diagnoses made; issue reports, opinions and certificates on matters within its competence; carry out comprehensive care actions, combining clinical performance with collective health, assisting families, individuals or specific groups, according to local planning; coordinate collective actions aimed at promoting and preventing oral health; schedule and supervise the supply of inputs for collective actions; train family health teams with regard to educational and preventive actions in oral health; supervise the work performed by the dental hygiene technician and dental assistant [8].

Certainly, the dentistry professionals actions are primarily focused on outpatient activities, as mentioned above. However, it is necessary to reinforce that even in the "limited" performance to the four the office walls, it is fully possible for the dentist to promote collective health in his patients.

A simple oral hygiene orientation and eating habits, when properly performed, is already able to change a person's day. Taking into account that dozens of patients are seen daily at health centers, after a month we will have hundreds of children, young people and adults impacted by this small, but effective dental health action, now also collective, since it has reached more than one individual.

However, not everything is easy, especially when we refer to the primary health care network via public government actions. It was possible to identify improvement in public system health user satisfaction after the oral health team implantation, although the comprehensiveness difficulties and care resolvability were highlighted. As a highlight, there is the curative actions prioritization based on spontaneous demand, in addition to the qualification lack of the professionals involved [9].

According to Peixoto [10], in the theoretical conception of the family health program, the universality and integrality concepts become concrete, assisting the basic health network in reducing the flow of users to complex care. However, individuals' full access to public health services has not been ensured in all family health units. Many did not resolutely acquire referral and

counter-referral services, making the family health program restricted to primary care.

Despite these adversities encountered since the programs implementation such as the family health program, "Brasil Sorridentes" (Smiling Brazil) and others, it must be emphasized that it was and is through them that the dentist has the possibility to more fully exercise his important role in public health. Where it operates.

There are several public efforts to promote oral health promotion in Brazil. In addition to the programs and strategies, the national water fluoridation represented a major step towards improving the population's oral health conditions. Consequently, a greater prominence space has been opened for the dentist profession, given that the concern with the oral health of the communities involves the care obtained with these professionals.

Among the different possibilities of the dentist's involvement in community activities, the following are suggested: seek partnership with community activists to form networks and alliances; support the vegetable gardens creation and orchards as a means of encouraging cooperative actions and the healthy food consumption; to associate with community groups active in promoting the mothers and children health, such as, for example, health ministry; provide the population participation in planning and making decisions regarding the community oral health; develop intersectoral actions with other public or private institutions [11].

In addition, in the epidemiological surveillance case of oral health, according to this same author, it is possible for dentists to participate in the epidemiological surveys organization, coordinating the local team, collecting data and feeding the information system.

## CONCLUSION

The dentist importance working in public health can only be understood when analyzing the entire historical and social context in which health itself is inserted.

When reflecting on the different historical humanity ages and analyzing how men sought to maintain their health, it is possible to conclude that Dentistry has always been present in civilizations, even though it is not yet a recognized and regulated profession.

Even in the dental professional absence, the concern with removing the infected teeth to avoid future systemic problems, only predicted this professional importance and this area for the health completion.

With the modernity, technology and scientific advances, oral health care began to guide the contemporary men thinking. In addition, government health measures and strategies have added to the dental professional approach to the population and to the expanded collective attention.

Given this, it is finally concluded that the dentist is not only important for the public health maintenance where he works but is also an actor responsible for executing this community in the prevention, promotion and health protection.

## REFERENCES

1. ALMEIDA, Gilmar Celli Maia de; FERREIRA, Maria Ângela Fernandes. Saúde bucal no contexto do Programa Saúde da Família: práticas de prevenção orientadas ao indivíduo e ao coletivo. *Cadernos de Saúde pública*. 2008; 24: 2131-2140.
2. RODRIGUES, Gabriel de Souza. Direito fundamental à saúde: uma análise entre o direito do indivíduo e da coletividade no acesso aos serviços do Sistema Único de Saúde. 2017.
3. DA CRUZ OTÁVIO, Geovanna Macedo; DAMASCENO, Vitor da Motta Souto; LEMOS, Tatyana Nunes. Importância do Conceito de Medicina Periodontal na Integralidade da Assistência à Saúde. *Oral Sciences*, 2017; 10-17.
4. DA SILVA, Diviane Alves et al. Condições de saúde bucal e atividades da vida diária em uma população de idosos no Brasil. *Revista Brasileira de Geriatria e Gerontologia*. 2016; 19: 917-929.
5. DA CRUZ OTÁVIO, Geovanna Macedo; DAMASCENO, Vitor da Motta Souto; LEMOS, Tatyana Nunes. Importância do Conceito de Medicina Periodontal na Integralidade da Assistência à Saúde. *Oral Sciences*. 2017; 10-17.
6. LUCIETTO, Deison Alencar; AMÂNCIO FILHO, Antenor; CASCONCELLOS, Miguel Murat. SOBRE A FORMAÇÃO DE ESTUDANTES DE ODONTOLOGIA EM TEMPOS DE SUS. *REVISTA INTERDISCIPLINAR DE ENSINO, PESQUISA E EXTENSÃO*. 2017; 4: 1.
7. MANASSERO, Fernanda Barcelos; BAVARESCO, Caren Serra. INSERÇÃO DO CIRURGIÃO-DENTISTA NA ESF: REVISÃO DE LITERATURA. *Revista de APS*. 2017; 19: 2.
8. FILGUEIRAS FACÓ, Elza et al. O Cirurgião-Dentista e o programa saúde da família na microrregião II, Ceará, Brasil. *Revista Brasileira em Promoção da Saúde*. 2005; 18: 2.
9. EMMI, Danielle Tupinambá; BARROSO, Regina Fátima Feio. Avaliação das ações de saúde bucal no Programa Saúde da Família no distrito de Mosqueiro, Pará. *Ciência & Saúde Coletiva*. 2008; 13: 35-41.
10. PEIXOTO, António Luís Marques Mendonça. Sus-Um Modelo de referência nos Cuidados de Saúde Oral Primários: Papel do Médico Dentista e das Universidades nas Ações de Saúde Pública no Brasil. 2017.
11. AERTS, Denise; ABEGG, Cláides; CESA, Kátia. O papel do cirurgião-dentista no Sistema Único de Saúde. *Ciência & Saúde Coletiva*. 2004; 9: 131-138.

## Cite this article

de Araújo Silva DN, Gonçalves Tomaz AF, da Silva NT, Maia Pinheiro CL, da Silva Azevedo ML, et al. (2020) *The Dentist Importance as a Transformation Agent in Public Health*. *JSM Dent* 8(2): 1128.