



AN OVERVIEW IMPORTANT ROLES OF DENTIST-PHARMACIST AND NURSES IN SKILLS AND KNOWLEDGE FOR HEALTH EDUCATIONS

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Abstract:

In order for pharmacists and nurses to be considered for membership on the oral health promotion team, it is essential to first determine where there are gaps in their knowledge, attitudes, and behaviors about oral health and then subsequently rectify those gaps. According to the findings of a few studies, pharmacists have an average level of knowledge, a negative attitude, and insufficient teaching procedures, all of which pertain to oral health. An increase in oral health awareness, on the other hand, has the potential to bring about a significant improvement in oral self-care habits. Conversely, the nurses demonstrated a very high level of expertise with regard to the teaching of oral health.

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Introduction:

The state of one's oral health is one of the most important aspects of being healthy overall. Dental health is more than just having healthy teeth. A person is considered to have good oral health if they are "free of chronic mouth and facial pain, oral and throat cancer, oral sores, birth defects such as cleft lip and palate, periodontal (gum) disease, tooth decay, and tooth loss, and other diseases and disorders which affect the mouth and oral cavity" [1]. This definition was provided by the World Health Organization (WHO).

Dental diseases are one of the most severe and widespread public health concerns that may be prevented, and they have resulted in a huge burden on both children and adults. There are a great number of dental disorders that have a significant impact on overall health, whilst systemic diseases may also bring about a mutual influence on mouth health. It is for this reason that it ought to be included into comprehensive health-promoting policies and practices, and it ought to be addressed in a manner that involves several professionals. In essence, the contribution of the dental and medical professionals working together is required in order to provide comprehensive health care. Promoting oral health is an essential component of the health care procedures that are carried out by medical professionals. As a result of the fact that they frequently interact with children and the adults who are responsible for their care in child care clinics, physicians have a fantastic chance to promote oral health habits [2,3].

The public's awareness of dental illnesses and oral health, the consumption of dental services, the application of dental sealants, and self-care practices such as brushing and flossing with fluoride-containing dentifrice on a regular basis are some of the identified predictors of oral diseases and the promotion of oral health. Despite the fact that public awareness can be helpful in lowering and perhaps eliminating oral health issues, underserved and high-risk groups typically do not understand the significance of oral health or the advantages that can be obtained via regular dental treatment [4]. For the purpose of early intervention, which includes the management of dental illness as well as age-specific prevention and counseling, a better knowledge of oral health perspectives during life stages at the individual and community levels is required [5].

Raising awareness among the general public and encouraging more people to have dental checkups might be beneficial to the process of early detection. It is essential to educate the community that is afflicted with sufficient knowledge about

oral illnesses, including risk factors and preventative methods. This information should be included in the material that is delivered. In addition to being the foundation of a healthy mouth, proper oral hygiene may prevent around 80 percent of dental issues from occurring. When it comes to the prevention of oral health issues, primary prevention, which includes cleaning one's teeth, is of the utmost significance [6]. The burden of oral illnesses is disproportionately higher in developing nations and among members of the impoverished population in general. The results of a comparable research conducted on school-aged children in Kenya revealed that 93 percent of the children used fluoride toothpaste with their toothbrushes, and 87 percent of them were aware that dental caries and periodontitis are avoidable [7].

It is common knowledge among dentists and other medical professionals that the dental health of a hospitalized patient cannot be separated from the patient's overall health of the patient. Numerous oral disorders are closely connected to illnesses that affect the body as a whole. In a perfect world, comprehensive health care would be achieved via the collaborative efforts of the dental and medical professions [8].

As a result of the considerable changes that are taking place in the position of the pharmacist, the role has expanded beyond the simple responsibilities of compounding and dispensing to encompass a wider variety of functions that are associated with primary care. A more active and integrated role for pharmacists in the preventative services provided by the National Health Service (NHS) has been explored. This position would involve aiding patients in self-monitoring their blood glucose levels and blood pressure levels, among other things. Patients who suffer from noncommunicable illnesses can receive pharmaceutical consultation from them, and they can assist in increasing patients' compliance and adherence to drug therapy [8]. Community pharmacists may also facilitate the implementation and delivery of preventive, early intervention, and referral services for oral health, with the goal of reducing the prevalence of potentially avoidable oral disorders such as tooth decay, gum disease, and oral cancer. This may be accomplished through the utilization of community pharmacies as optimal health care destinations. As a result of the fact that they are trustworthy, competent, and well-respected health-care experts, the personnel at community pharmacies play an essential part in providing quality medical treatment to individuals of all ages and stages of life [9].

Review:

It is crucial to one's overall health and quality of life to maintain good oral health. If an individual is free from any diseases or disorders that prevent them from biting, chewing, smiling, speaking, and having psychosocial well-being, then they are considered to be free from these conditions. In spite of the fact that the vast majority of oral disorders do not pose a threat to one's life, the repercussions of poor oral health can have an impact on one's quality of life. The community has been burdened by the high expense of dental care, particularly among persons who are economically disadvantaged and socially marginalized within the population. The expenditures that were made in Malaysia for oral health-care services in the year 2015 were projected to be RM401.2 million, which is similar to around 3.4% of the overall expenditures made for national health [10]. Community pharmacists may be encouraged to play a more active part in the promotion of oral health through the use of interprofessional collaboration between dentists and pharmacists. The provision of information and help for self-care and the utilization of over-the-counter (OTC) items for minor issues pertaining to oral health has the potential to significantly lower the dental costs of consumers and to improve the quality of patient treatment within the Malaysian health-care system. When it comes to the provision of primary health care services, community pharmacies are an indispensable participant. As a result of their convenient accessibility and their location in the heart of the community, they have the potential to be the first health care providers to interact with the general people in relation to oral health [11].

A National Survey on the Quality Use of Medicine (NSUM) was conducted in 2015, and it included responses from three thousand consumers in Malaysia. It is estimated that around 76% of them received their medicinal supplies from a retail drugstore. In addition, seventy percent of them stated that they require further counseling with the pharmacist in order to better comprehend and overcome any difficulties that may arise with their current medications. Even though the function of the community pharmacist in the health care system of Malaysia is continually expanding, there are still potential for improvement in the pharmacist's role in the near future [12]. This is a reflection of the fact that there are still opportunities for improvement in the role of the pharmacist concentrating on patient-centered care. The total prevalence of oral health disorders that were reported among the population of Malaysia was measured at 5.2% (95% confidence interval: 4.8–

5.6). The following are some of the risk factors that contribute to poor oral health: poor diets, high sugar intake in meals and drinks, unsuitable methods for baby feeding, poor cleanliness, excessive smoking, and alcohol usage. Self-care and self-medication, seeking treatment or advice from health-care providers, purchasing medication after obtaining advice from the pharmacist, and seeking advice from sources other than a health-care provider are the types of oral health-seeking behaviors that are prevalent among the population of Malaysia. Nearly all Malaysians will experience dental or oral health issues at some point in their lives. It was observed that 23.2% of the population seeks advice and medicines from the pharmacist regarding oral health; hence, pharmacists are ideal in delivering oral health care and boosting knowledge of oral health [13,14].

There is a dearth of research that investigates the function of community pharmacists in the provision of dental medicine services. It has been demonstrated in previous research that the pharmacist plays a significant part in the provision of oral health services, and they are eager to increase their level of expertise in this area. Furthermore, the investigations brought to light the importance of expanding cooperation between oral health-care providers and members of the pharmaceutical profession [14]. When it comes to oral health, there is currently no information available about the knowledge, attitudes, practices, and abilities of community pharmacists who are currently working in Malaysia. On the other hand, there is just one research that was carried out among undergraduate pharmacy students to evaluate their knowledge and attitude about oral health [14].

Regarding the behaviors that the participants in the research engage in with regard to their oral health, the vast majority of the medical professionals stated that they clean their teeth consistently. On the other hand, statistically speaking, there were substantial disparities identified regarding the frequency with which they brushed their teeth. The majority of them claimed cleaning their teeth once per day, whereas the others reported brushing their teeth less often. This conclusion was comparable to the findings of a study that was carried out in Ludhiana, India, where it was revealed that roughly fifty percent of the dentists and other medical professionals brushed their teeth once a day [15]. According to the findings of a survey that was done in Riyadh, 77.9% of the individuals working in the medical field only washed their teeth once in the morning. The suggestion made by the American Dental Association, which states that brushing

one's teeth twice a day is an effective technique of preserving oral health and avoiding tooth decay [16], was not in agreement with our study.

Conclusion:

The cumulative score for oral health knowledge was determined by analyzing the responses of the respondents to the different questions contained in the questionnaire and then combining those responses together to form the total score. Individuals were deemed to have provided accurate replies if they replied in accordance with the following: It is recommended that teeth be cleaned twice a day, that all vertical, horizontal, and circular methods of brushing teeth are correct as needed, that healthy gums appear pink and firm, that a dentist should be visited once or twice a year, that dental calculus is the condition that requires dental intervention, that oral health has an effect on the rest of the body, that the most effective method of preventing tooth decay is brushing regularly, that sugary diets are the cause of tooth decay, and that fluoride tooth paste and mouth wash are essential components of dental hygiene. The development, implementation, expansion, and evaluation of evidence-based resources, guidelines, the scope of oral health, and services should lead to the establishment of pharmacy-nurse professional organizations in conjunction with dentistry associations. This will allow for the provision of enhanced oral health care across all communities. As providers of oral health care, community pharmacists-nurses are required to take on additional tasks beyond their current duties.

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