



Oral healthcare in rural areas



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Oral healthcare is a persistent and unsolved problem in areas located outside towns and cities. The farther we go from cities, the lower the numbers of dental health professionals. As a result, patients are not provided with treatment or have to travel further to obtain oral healthcare. The distance from major medical centers and specialty clinics has greater ramifications for patients with complex diseases and special needs. Various programs, such as loan repayment and other benefits offered to dentists practicing in rural areas, partially address this issue. However, a system that provides lifetime care rather than a series of episodic dental interventions to treat acute exacerbations of chronic conditions does not exist. We have to admit that in many cases, the oral healthcare provided to patients in remote areas is not equal to the treatment available for patients in areas with higher population density. The relative geographic isolation, the shortage of healthcare providers, the lack of transportation to the closest medical center, the higher proportion of people living in poverty, and the higher rates of older adults in remote areas are the major reasons for the lower quality of care. Other contributing factors in the United States are the limited number of dentists willing to accept Medicaid and the minimal support for dental treatment from Medicare.

This will probably not change in the near future, and therefore oral healthcare will continue to be compromised. So, what can be done?

For the long term, prevention should be considered the number one goal; this should include education, routine checkups, and fluoridation programs. More immediate solutions should pursue methods to virtually and physically shorten the distance between medical centers and the periphery. Virtually, more teledentistry programs could be used for evaluation and consultation, and physically, mobile units can be used, with hygienists, dentists, and specialists who travel to remote areas on a routine basis. Dental students and specialty residents can join this effort and provide treatment under experienced faculty supervision.

Teledentistry appointments or video conferences cannot replace treatment visits, but with careful planning and support from on-site healthcare providers, they may provide sufficient information to build a preliminary treatment plan.

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