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Screening for type 2 diabetes and periodontitis patients (CODAPT-My©): a multidisciplinary care approach

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Source BMC HEALTH SERVICES RESEARCH

Volume: 22 Issue: 1

DOI: 10.1186/s12913-022-08429-w

Article Number 1034

Published AUG 13 2022

Indexed 2022-08-24

Document Type Article

Abstract Background: The practice of referring diabetic patients for dental

intervention has been poor despite awareness and knowledge of the oral health effects of diabetes. Likewise, dentists treating patients receiving diabetes treatment are rarely updated on the glycaemic status and as a result, the opportunity for shared

management of these patients is missed. This study aimed to

provide a standardised care pathway which will initiate screening for diabetes from dental clinics and link patients with primary care for them to receive optimised care for glycaemic control.

Method: A Modified Delphi technique was employed to obtain consensus on recommendations, based on current evidence and best care practices to screen for diabetes among patients attending dental clinics for periodontitis. Expert panel members were recruited using snowball technique where the experts comprised Family Medicine Specialists (5), Periodontists (6), Endocrinologists (3) and Clinical Pharmacists (4) who are involved in management of patients with diabetes at public and private healthcare facilities. Care algorithms were designed based on existing public healthcare services.

Results: The CODAPT (c) panel recommends referral to primary care for further evaluation of glycaemic status if patients diagnosed with periodontitis record fasting capillary blood glucose levels >= 5.6 mmol/L. Intervention treatment options for prediabetes are listed, and emphasis on feedback to the dental healthcare team is outlined specifically.

Conclusion: The CODAPT (c) care pathway has the potential to link dental clinics with primary care for diagnosis and/or optimised treatment of prediabetes/diabetes among patients receiving periodontitis treatment.

Keywords

Author Keywords: Care pathway; Primary healthcare; Dental;

Periodontitis; Diabetes; Prediabetes

Keywords Plus: DISEASE; THERAPY; UPDATE

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