



Aide Memoire for Smile4life

Recovery Focussed Pharmaceutical Care for Patients Prescribed Opiate Replacement Therapy

Service Aim : To provide holistic pharmaceutical care for patients prescribed opiate replacement therapy (ORT) and promote recovery by – 1.1.5 Providing general health advice including pharmaceutical public health services and signposting to assist access to further advice or assistance.

Service Outline and standards: 2.10 The community pharmacist should provide information and advice (with appropriate signposting) on Oral health (additionally Smoking cessation, healthy eating and exercise encompass the broader common risk factor approach to improving oral health and therefore oral health can be linked to information provided on these topics)

What do we know about the client group?

- Unpredictable lifestyles can lead to problems maintaining good oral health and accessing a dentist
- Check-ups may not be seen as a high priority; dental attendance is often dependant on urgent need
- Missed dental appointments and financial penalties impact on future dental appointments and use of dental services
- Dental anxiety
- Oral self care may be low priority and poor oral health accepted as the norm as other competing priorities take over
- People with missing teeth may feel self conscious and embarrassed about their appearance and this can affect confidence and self esteem
- Resuming dental treatment after many years requires support

Barriers	Enablers
<ul style="list-style-type: none"> • Chaotic and unpredictable lifestyle • No regular attendance at dental services • Registration information • Oral care - low priority • Low health expectations – unnecessary to go for a check up if not in pain • Perception of need low without pain however urgency if experiencing pain • Dentures – no teeth = no need for dental visits mentality • Dental anxiety and stigma 	<ul style="list-style-type: none"> • Getting information about oral health • Re-establishing contact with health services • Accepting responsibility for own health • Overcoming feeling of stigma and embarrassment • Increased and improved self perceptions motivate to seek health and treatment • Turning point on the recovery journey where begin to change and adopt behaviours conducive to good health

Questions

- **Is the patient registered with a dentist?**
Offer signposting / assistance for registering. Smile4life Credit card 'Need to find a dentist' local telephone number and NHS24.
- **When was the patient last at the dentist?**
Check up not a priority for the client group, generally attend only when in pain.
Provide advice about the benefits of a regular dental check up – Examination Free, early detection of oral health problems e.g. gum disease, decay, mouth cancer
- **Is the patient experiencing any oral pain or discomfort?**
If yes – managing pain with OTC pharmacy products. If no, promote good oral hygiene and provide appropriate intervention level

Prompts

What level of intervention does the patient require? Assess readiness for oral health improvement e.g. Not Ready, Ambivalent, Ready and deliver the intervention appropriate for the patient.

Not ready – Basic Intervention

- Provide oral health information
- Provide an oral health pack
- Provide leaflet and local information e.g. dental practice or Helpline information
- Provide information on cost of treatment, entitlements for free treatment, access to HC1 forms
- Agree to follow up with patient
- Record activity / discussion in the PCR

Ambivalent – Intermediate intervention

- Provide oral health information
- Provide an oral health pack
- Provide leaflet and local information e.g. dental practice or Helpline information
- Provide information on cost/ entitlements for free treatment, access to HC1 forms
- Discuss current behaviours / routines
- Explore reasons for non adherence to oral health and hygiene practices
- Understand reasons for non adherence
- Discuss key oral health messages and reasons for improving or maintain good oral health
- Agree to follow up
- Record activity / discussion in the PCR

Ready – Advanced intervention

- Provide oral health information
- Provide an oral health pack
- Provide leaflet and local information e.g. dental practice or Helpline information
- Provide information on cost/ entitlements for free treatment, access to HC1 forms
- Negotiate, help, plan, oral health goals with the patient and assist the patient to achieve goals e.g. choosing an oral health behaviour to focus on
Toothbrushing, fluoride toothpaste, diet, smoking, or other
- Assist with registration / appointment
- Agree to follow up with the patient
- Record activity / discussion in the PCR



Education points

Toothbrushing and toothpaste –Patients report that they know how to brush their teeth but when asked many are not following basic advice.

- Brush for 2 minutes twice a day
- Use a dry toothbrush – do not wet the brush before or after putting toothpaste on
- Use a pea-sized amount of appropriate strength of Fluoride toothpaste (1350-1500ppmF)
- Spit out the toothpaste and rinse your brush but not your mouth

Snacks and Drinks –Reduce the *amount* and *frequency* of sugar

- Try swapping high sugar foods for low sugar options
- Reduce fizzy juice consumption, try to have only juice drinks at meal times
- Drink juices through a straw

Sugar free chewing gum –Chewing sugar free gum stimulates saliva in the mouth which is natural defence against acids in the mouth

- Chew sugar free gum after taking methadone
- Chew sugar free gum after sugary drinks and snacks
- Chewing sugar free gum is not an alternative to toothbrushing but is beneficial for oral health

Methadone –There is no conclusive evidence that methadone on its own can cause harm to oral health, though there are some risk factors and precautions

- Always encourage patients to drink water and rinse mouth after taking methadone
- Chew sugar free gum
- Brush teeth before methadone dose for some protection from Fluoride toothpaste N.B never advise to brush straight after methadone/ sugary drink/ foods as this can damage the tooth surfaces
- Rinse with a fluoride mouthwash

Dental Attendance –Visiting the dentist on a regular basis will mean that problems will be spotted earlier and over time you will need less treatment

- For most a check up every 6 months is sufficient, however this is tailored for individual patients

Warning signs for Oral Cancer

Smoking and alcohol consumption greatly increases the risk of oral cancer

- Any white, red or speckled patches
- Ulcers or sores that don't heal within 2 weeks
- Lumps, bumps in the mouth or the lip
- Unexplained speech patterns or difficulty swallowing