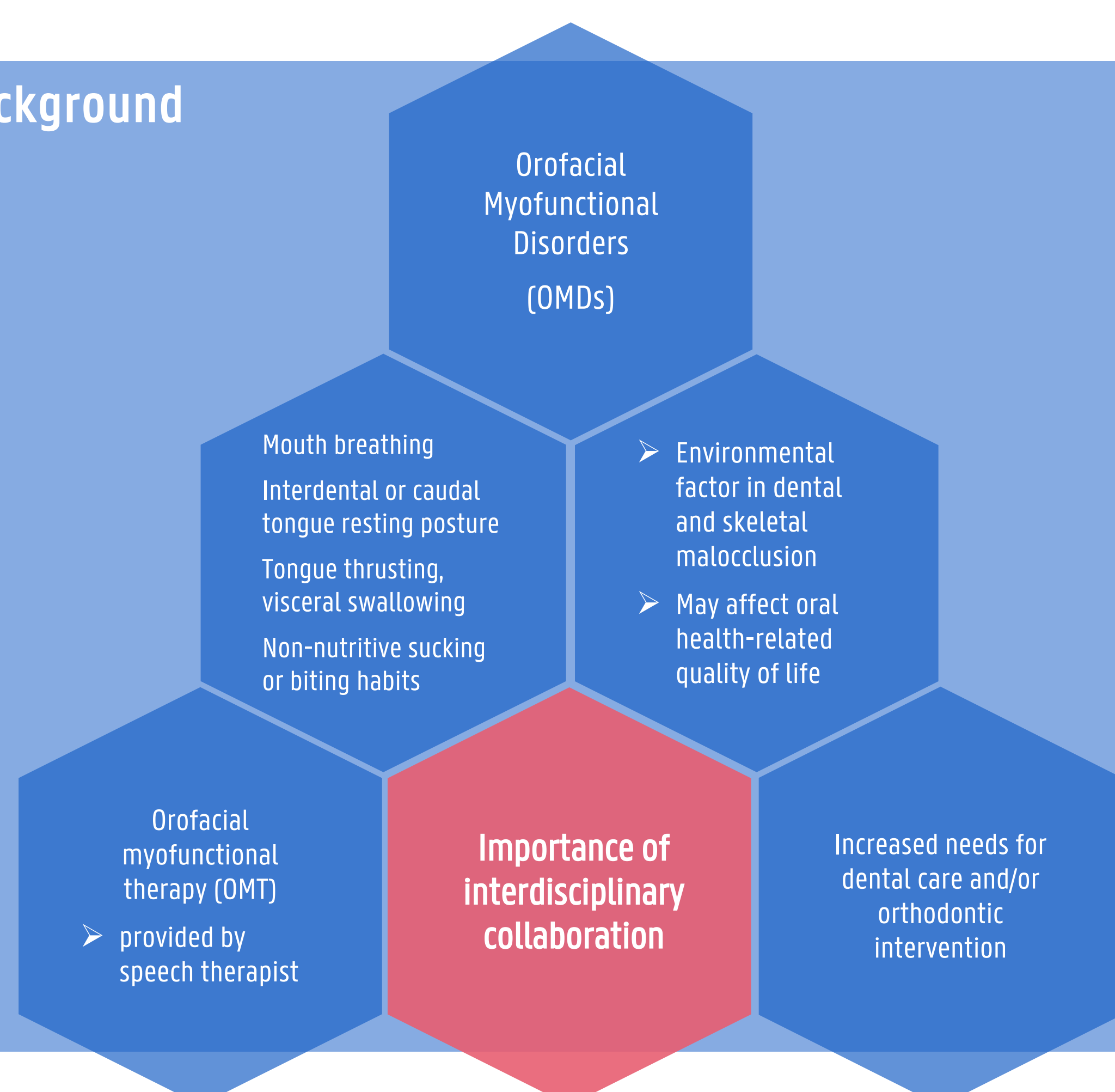


REHABILITATION SCIENCES – CENTRE FOR SPEECH AND LANGUAGE SCIENCES

Van der Straeten Charis, MSc.; Philibert Quinten, BSc.; Bettens Kim, PhD; De Pauw Guy, PhD; Van Lierde Kristiane, PhD
Contact: Charis.VanderStraeten@UGent.be

P4.42: TOWARDS INTERDISCIPLINARY COOPERATION: DENTISTS' AND ORTHODONTISTS' VIEWS ON OROFACIAL MYOFUNCTIONAL DISORDERS AND THERAPY

Background



OMT: a controversial topic among dentistry professionals!

A lack of enthusiasm regarding OMT may be attributed to¹

1. Limited workspace for providing therapy
2. A shortage of clinicians with expertise
3. Difficulty of the subject and limited time
4. Inadequate education and training
5. The supposition that a change in morphology will result in a change in function
6. The belief that there is insufficient evidence for OMT
7. A supposed unpredictability of OMT

Aim of this study



To investigate self-reported knowledge and attitudes of Flemish dentists and orthodontists regarding OMDs and OMT, as well as to evaluate the impact of specialization, degree of experience, and educational programme.

Methods



Survey (27 items)

- Demographical information
- Self-reported knowledge of OMDs and OMT
- Self-reported attitude towards OMT
- Use of OMT in clinical practice
- 5-point Likert scale



Statistical analysis using IBM SPSS Statistics

- p -value = .050
- Fisher-Freeman-Halton exact test
- Post-hoc analysis using Bonferroni correction



79 participants

- 44% University A
- 44% University B
- 12% University C



61% general dentists
39% orthodontists



27% <10 years experience
15% 10-20 years experience
58% >20 years experience

Results

Some significant differences based on educational programme

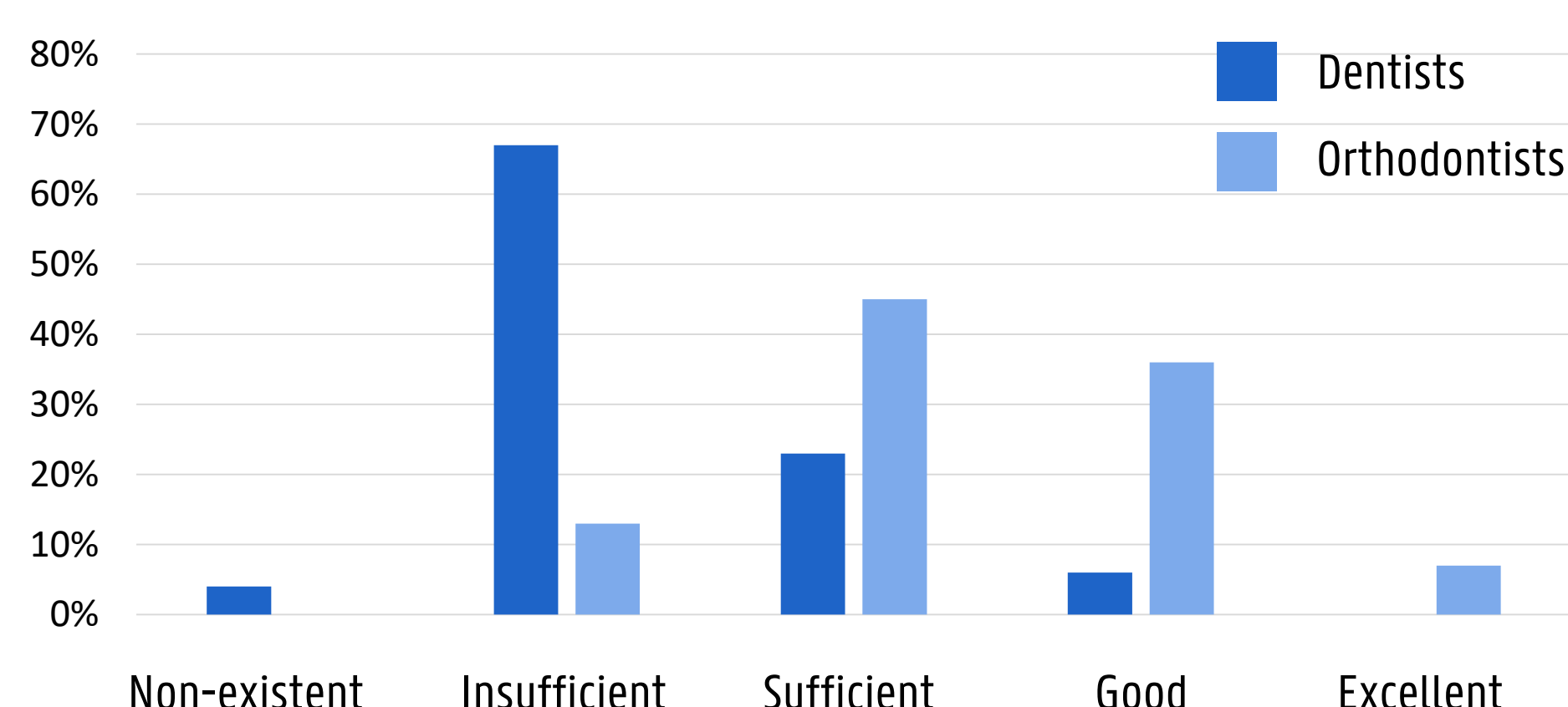
- Between graduates from Universities A and C and graduates from Universities B and C
- None between graduates from Universities A and B

Several significant differences based on specialization

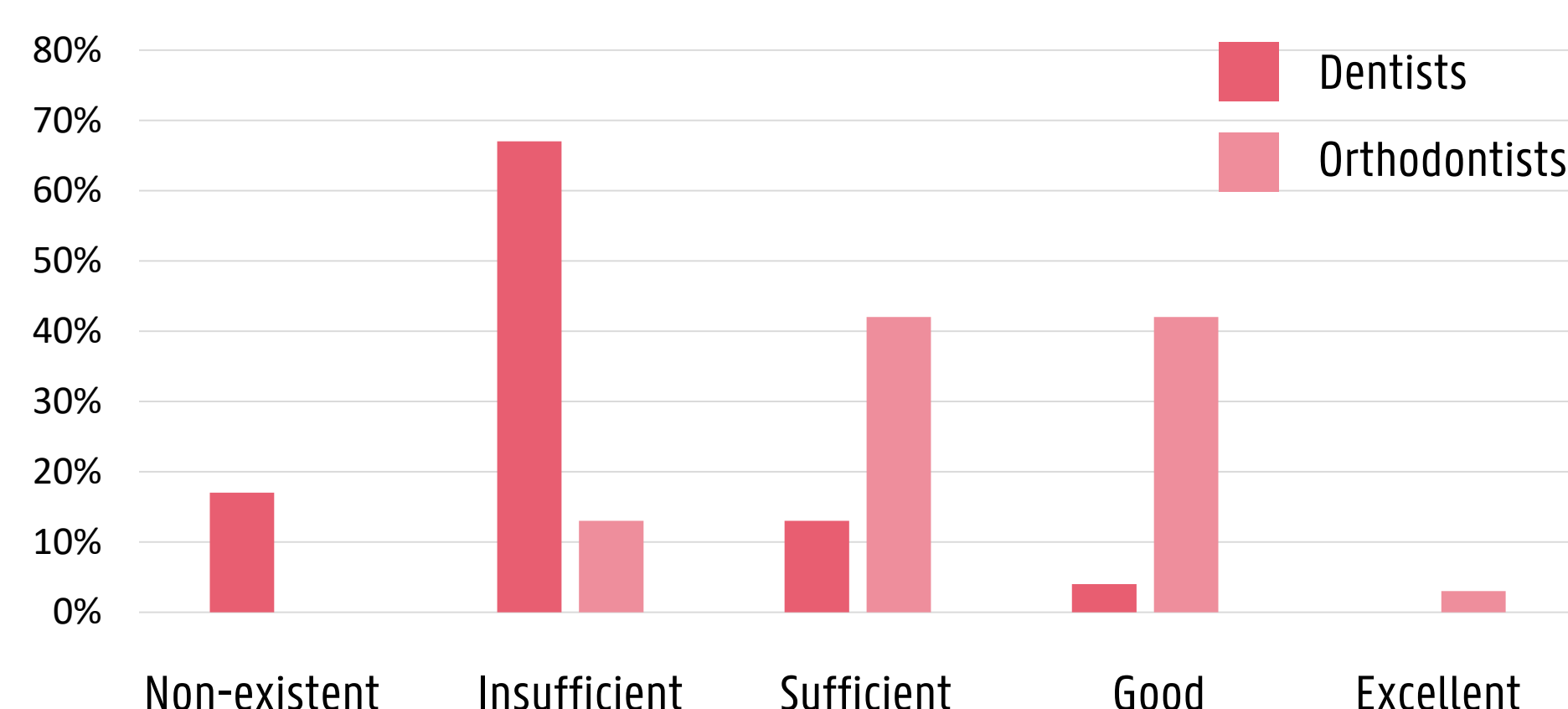
- Regarding self-reported knowledge and attitudes ($p < .05$)
- On average, orthodontists prescribe OMT for 24% of their patients, general dentists for 5% ($p < .001$)

No significant differences found based on the amount of experience in the field

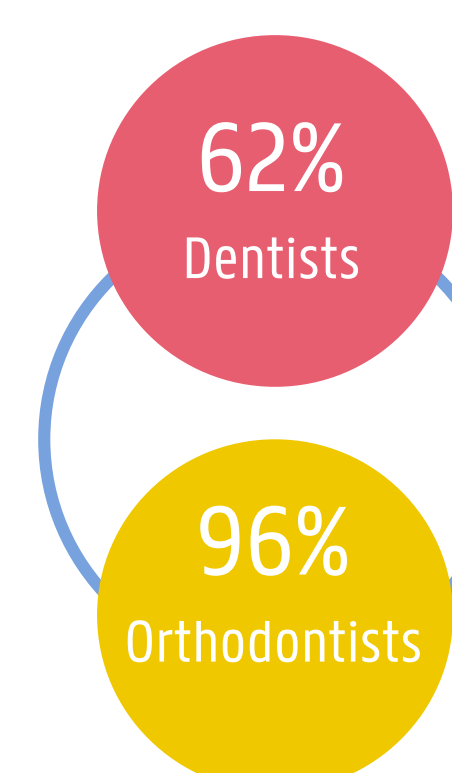
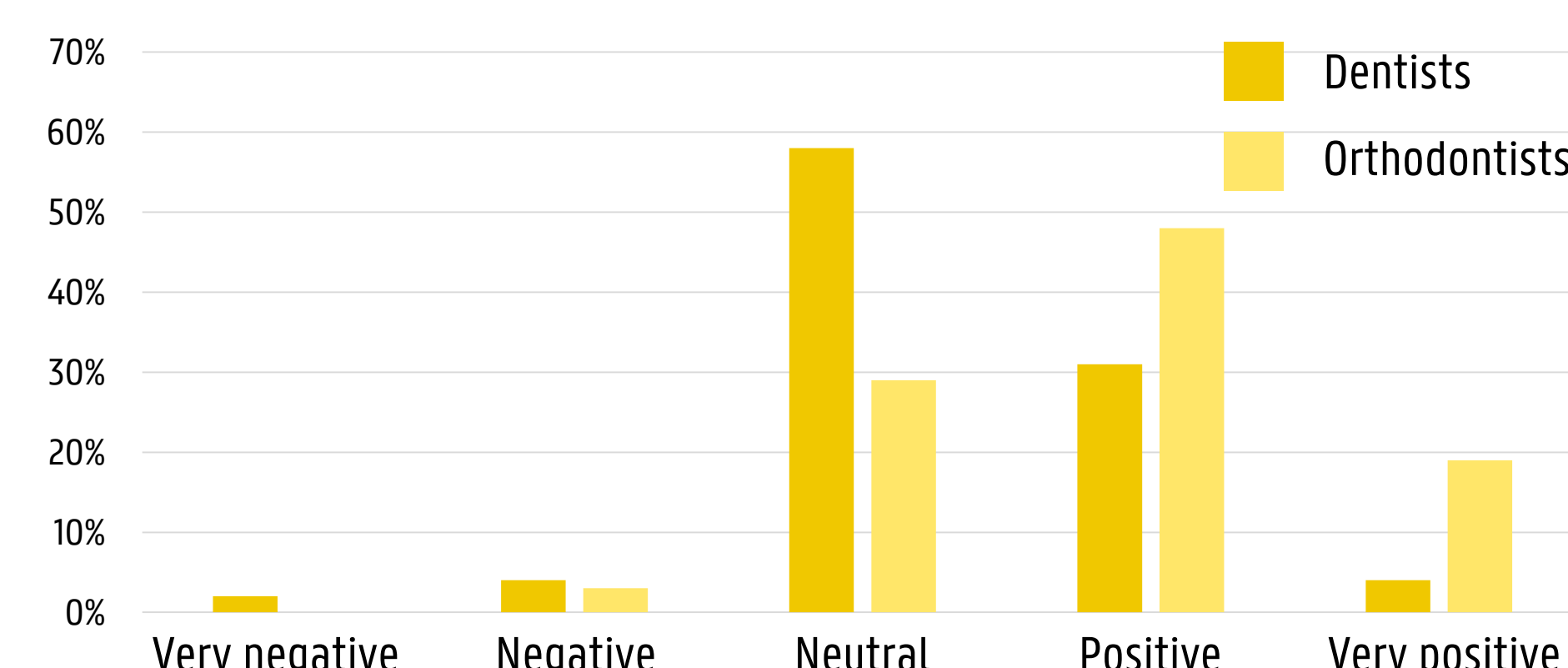
General knowledge on OMDs



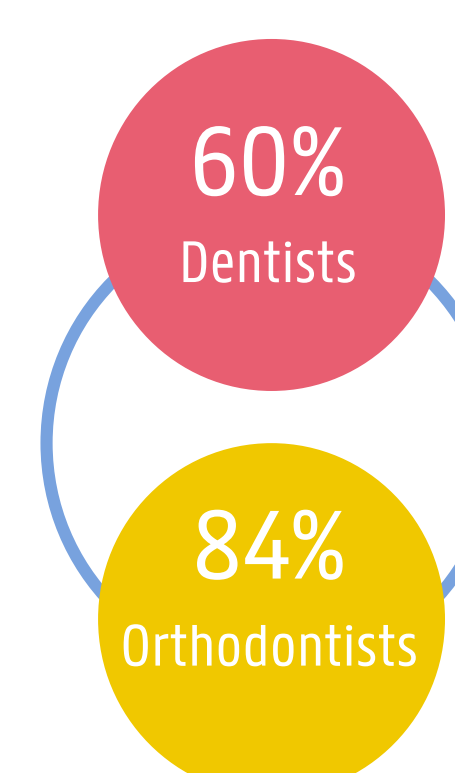
General knowledge on OMT



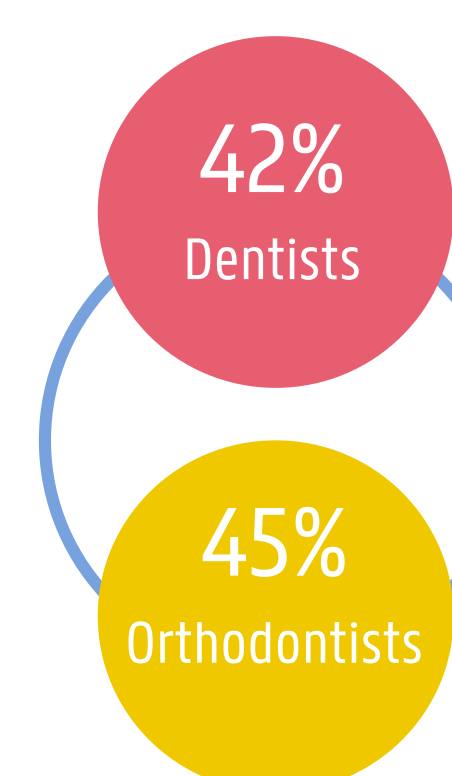
General attitude towards OMT



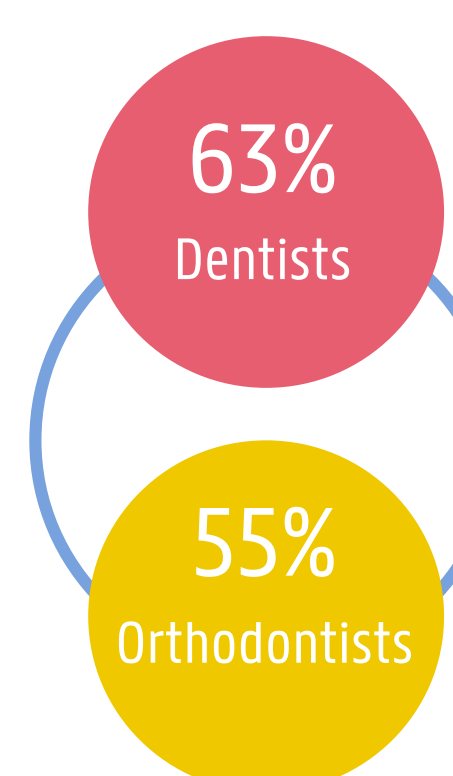
sees proper knowledge on OMDs as important.



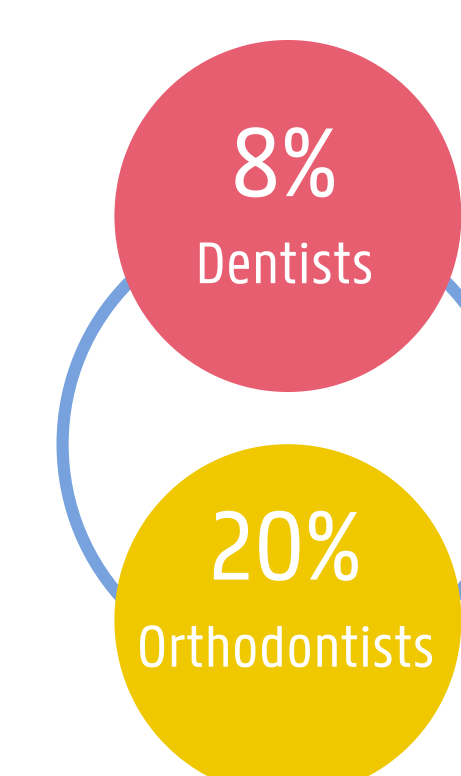
trusts in OMT in combination with orthodontic treatment.



considers the subject of OMDs/OMT to be complicated.



thinks there is a shortage of OMT practitioners with expertise.



believes their education has provided adequate information on OMT.

Conclusion: what do we know?

- ✓ Despite recognizing the importance, 56% reports a lack of knowledge regarding OMDs/OMT
- ✓ General consensus: educational programmes provide insufficient information on OMDs/OMT
- ✓ Flemish dentists and orthodontists generally show a positive attitude towards OMT
- ✓ Considering a high prevalence of OMS in children in primary (62%) and early mixed (81%) dentition, and even higher in children with malocclusion,³ OMT is prescribed relatively infrequently

What can we do?

- ♀ Supplement current curricula for prospective professionals
 - ♀ Provide state-of-the-art refresher courses
 - ♀ Create networks to facilitate communication and collaboration between speech therapists and dentistry professionals
 - ♀ Inform healthcare practitioners of new developments in evidence-based practice
- Interprofessional education promotes interprofessional collaborative practice!²**

References

