OUT OF THE ER AND INTO THE DENTIST’S OFFICE

For most people with private dental insurance, toothaches and cavities typically prove to be little more than a minor inconvenience.

But for many Medicaid patients who have inadequate access to dental care or an inability to navigate the system, these non-traumatic dental conditions can turn into months of pain and recurrent visits to an emergency department or physician’s office.

Dr. Christopher Okunseri, associate professor of dental public health at Marquette’s School of Dentistry, has been awarded more than $300,000 from the National Institutes of Health to study the different treatments provided to patients using emergency departments for non-traumatic dental conditions.

“Just as with non-urgent medical visits, non-traumatic dental condition visits to emergency departments can pose significant cost, practice and programming implications and may contribute to emergency department overcrowding,” says Okunseri. “In most cases, patients will receive only a temporary treatment of antibiotics and/or analgesics and will still require follow-up care with a dental provider.”

According to Okunseri, reducing dental-related emergency department visits by 1 percent in Wisconsin alone could save Medicaid millions of dollars.

In addition, he says not enough is known about which treatments are being provided to patients across different demographics. His study aims to more fully explore which medications are being prescribed for non-traumatic dental conditions in emergency departments nationwide and more accurately identify the population groups that seek dental care in emergency departments. He also will examine if racial and ethnic disparities exist in prescribing practices.

“While it would be difficult to completely eliminate visits to emergency departments for non-traumatic dental conditions, we can reduce them and redirect resources toward helping these individuals receive access to quality dental services,” Okunseri says.

He hopes the results of his research will initiate discussions between health care professionals and policymakers on how to address these issues and lead to the development of improved access to care and medication guidelines for these conditions. — ALB