

Professionals Report

This summary report will illustrate the findings and recommendations from the Michigan Assessment of Blood Pressure and Diabetes Screening Practices among oral health professionals conducted by the Michigan Department of Health and Human Services in collaboration with Delta Dental of Michigan, Ohio and Indiana.

The results from this assessment will assist in increased awareness, interventions such as education and sharing of best practices to increase the number of Michigan residents screened and referred to primary care providers by oral health professionals for High Blood Pressure (HBP) and diabetes.

- ▶ An estimated 70 million adults in the United States have high blood pressure (HBP) and over 29 million (9.3%) have diabetes.
- ▶ In 2014, 799,350 (10.4%) Michigan adults reported they had ever been told they had diabetes, and in 2013 34.6% of Michigan adults were ever told they had hypertension (HBP).
- ▶ It was also reported that in 2014, 62.0% of adults ages 18-64 and 62.4% adults over ages 65 in the United States had a dental visit.
- ▶ In 2013, about 60% of Michigan adults with diabetes visited the dentist.
- ▶ Dental visits can provide an opportunity to improve both oral health and general health.



- A survey was mailed to 4,646 dental practices with a \$2 dollar incentive
- 1,452 surveys were returned for a return rate of 31 percent (31%)
- Survey also sent electronically via email, 263 responses received
- 1,715 responses to survey
- Actual total of 1,703 completed survey responses
- Responses from 465 zip codes
- Majority were dentists (82%)
- 63% of dentists had 21+ yrs. in practice

- Oral health professionals are more comfortable screening BP than diabetes
- Inconsistency in using current predetermined values to define hypertension and diabetes
- There were large differences in comfort level for screening when examining the providers who do screen for HBP and diabetes compared to those that do not
- Some dental providers inform patients when they have these diseases or provide some patient education. Most do not refer or contact a primary care provider

- It is important to include hypertension and diabetes screening as part of routine oral health care and assessment
- There is a need for awareness of screening for hypertension and diabetes in the dental setting
- Next steps include developing statewide guidelines, a referral process protocol and offering continuing education (CE) opportunities

Key Findings

Comfort levels taking BPs and checking for diabetes:

Comfort level taking BP	Screen at least some of their patients for HBP	Does not screen patients for HBP
Very Uncomfortable	6 (0.3)	3 (1.9)
Uncomfortable	15 (0.7)	11 (7.1)
Neutral	92 (4.4)	48 (31.2)
Comfortable	413 (19.6)	43 (27.9)
Very Comfortable	1581 (75.0)	49 (31.8)

Comfort level screening diabetes	Screen at least some of their patients for diabetes	Does not screen patients for diabetes
Very Uncomfortable	5 (0.4)	61 (11.3)
Uncomfortable	57 (5.1)	127 (23.5)
Neutral	344 (30.6)	244 (45.2)
Comfortable	362 (32.1)	66 (12.2)
Very Comfortable	358 (31.8)	42 (7.8)

If you do not take BPs, why not?:

- Too little time
- Do not see the need
- Equipment not available
- No reimbursement or incentive to perform this

If you do not check for diabetes, why not?:

- Consider it outside scope of practice
- Treat dental condition and suggest they see primary caregiver
- Equipment not available
- Oral signs can mean other things
- No reimbursement or incentive to check for this

Suggestions for education resources:

- Online/webinar CE courses
- Info fact sheets and pamphlets
- Reference cards for chairside
- Onsite refresher training

Recommendations/Next Steps

Based on survey findings, future activities for MDHHS may include:

- State of Michigan guidelines for screening for hypertension and diabetes in dental settings
- Referral guidelines and materials can be created for dental and medical providers to use when referring for medical or dental care
- Chairside reference cards can be developed for oral health professionals advising on when to refer a patient for care
- Education opportunities can be created to educate oral health professionals on proper screening methods for both hypertension and diabetes
- Pilot interventions could be developed between oral health practices and primary care sites to incorporate best practices and successful methods of referral to increase the number of Michigan residents that are screened and referred.
- Connections with oral health practices to community resources for people with hypertension and diabetes could be encouraged.

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For more information write:

demings@michigan.gov

