San Francisco practice makes house calls

In a society where expert medical care seems ever more elusive and impersonal, the last thing you might expect is a dental practice that makes house calls. However, Bay Area House Call Dentists (BAHCD), based in San Francisco, has built a thriving practice around visiting their patients where they live.

Rather than serve the well to do, BAHCD specializes in helping some of the Bay Area’s least-served populations: the elderly, the housebound and the infirm. BAHCD is a service of the Blende Dental Group, headed by Dr. David Blende, a practitioner with more than 20 years of experience providing comprehensive dental care and a leader in the field of dental surgery.

“We serve not only people with disabilities, which is what people think of when they think of special needs, but also people with severe phobias and complex medical conditions,” explained Dr. Cheryl Elacio, director of house call services and geriatric services for BAHCD. “Basically anyone who is not a good candidate for a traditional dental office for either physical, emotional or cognitive reasons.”

BAHCD patients may include a child with autism, a senior with Alzheimer’s disease, an obese or otherwise immobile individual or someone who is simply too scared to set foot in a dentist’s office. These are people who regularly go without dental care because their caretakers are unable to get them to a dentist, and because dental problems, unless accompanied by acute pain, often go diagnosed.

During their house calls, BAHCD practitioners take X-rays, perform cleanings, identify gum disease, prescribe medicines, remove infected teeth, identify and sometimes fix poorly fitting dentures and determine effective courses for longer term comprehensive treatment where needed.

Because of the flexible design of the Bay Area House Call Dentists visit the elderly, housebound and the infirm in their San Francisco homes (Photo/Photoquest, Dreamsine.com).

Another reason to stay in shape

The health complications of being overweight, such as increased risk of heart disease, type 2 diabetes and certain cancers, have long been reported. Health care professionals often urge patients to manage their weight and strive to get physical exercise each day to achieve and maintain overall health.

And now, researchers have uncovered another benefit of maintaining a fit lifestyle: healthy teeth and gums.

In a study published in the August
the equipment used, patients can be examined in their own favorite chair or even lying in bed. Not only can such treatment bring immediate relief, but it can also save the patient and his or her caretaker many subsequent, arduous trips out of the house.

“If a patient needs a lot of work requiring several specialists, he might have to visit one office after another — an endodontist’s office for a root canal, a periodontist’s office for gum surgery, a dentist to deal with decay,” says Blende. “But when we do a house call, we’re going to gather all the information we need to make a diagnosis and bring in members of our specialist team. So we’ve saved them, maybe, three or four appointments. If they need ongoing treatment, they’re all done in the home. So a patient might go from leaving home for six or seven trips in a year to leaving home just once if they need treatment that must be done in our office or in a hospital.”

That can save a lot of anxiety for a caregiver and can mean the difference between receiving or forgetting comprehensive dental care for someone who can’t or won’t, or leave his/her home without difficulty. If the patient needs ongoing treatment that must be done in the home, the BAHCD team handles the arrangements for the follow-up work at the BAHCD office or in a local dentist’s office, so the patient can get the patient to and from treatment, completing the work itself and having a specialist on hand to keep the patient calm, comfortable and safe.

Elacio and her BAHCD colleague, Dr. Samer Itani, perform many of the house calls. Once a patient is found to need hospital or in-office work, Blende frequently takes the helm in planning and providing this care. Blende is an expert in using general anesthesia during dental procedures, which is especially important for children and phobic patients. Allowing a confused or frightened patient to sleep through dental surgery considerably reduces stress for all concerned.

When their patients do need hospital attention, Blende, who is chief of the Division of Dentistry at Kaiser Permanente San Francisco and chief of the Dental Division at California Permanente San Francisco and chief of the Division of Dentistry at Kaiser Permanente San Francisco, is well positioned to make that happen. Kaiser Permanente San Francisco, are well positioned to make that happen quickly and smoothly.

Increasingly over the past two years, the BAHCD team has been a staff of experienced and compassionate assistants, visits senior communities, where they may see up to 20 patients in an afternoon. The problem of undiagnosed dental issues is particularly acute in such communities, according to Itani. And those issues, he says, are much more dangerous to a patient’s overall health than many people realize.

“We recently went to a community where we saw 19 seniors,” Itani says. “Several had been there for over a year, yet their caregivers weren’t even aware they had partial dentures. So, clearly, those dentures weren’t getting cleaned properly. That’s when infection starts to set in, to mention the obvious issue of discomfort. We might find broken teeth or gum disease, lesions that can be a sign of oral cancer, and gum disease, which is quite dangerous because it breeds bacteria which gets into the blood stream, contributing to pneumonia, heart attacks and stroke.”

“All these things have to be treated, but they often aren’t,” Itani says. “It’s a crucial issue for the elderly, not just for their daily comfort but for their overall health.”

In fact, Bay Area House Call Dentist teams frequently receive referrals from other dentists who are in despair over getting their elderly or infirm patients in for office visits, who turn to the BAHCD’s in-house treatment capabilities as the best answer.

“House calls are not easy, but we firmly believe that everybody can have, and everybody deserves, the best possible care,” Itani says.

A success story

Minerva Dutra of Petaluma, Calif., is more than convinced of the value of in-home dental care. Dutra’s 76-year-old mother, Delores Dawson, has Alzheimer’s disease, uses a wheelchair and lives in a residential care home. Dawson recently received at-home care from BAHCD, followed by surgery performed by Blende.

“My mother has specific needs, and other dentists weren’t able to accommodate her,” Dutra says. “I was very happy to have a dentist come to us instead of my having to drive my mom all around. The doctor who came to our home, Elacio, and her assistant were sweet, caring and extremely skillful. When it was time for the surgery, Blende was fantastic, always letting me know what was going on and taking extra steps to be sure my mom was comfortable. I had all the confidence in the world in him. Now my mom feels much better. It’s a great relief.”

(Source: PRWEB)

Issue of the Journal of Periodontology, researchers found that 70 percent of patients who maintained a healthy weight and had high levels of physical fitness had a lower incidence of severe periodontitis. Using body mass index (BMI) and percent body fat as a measure of weight control, and maximal oxygen consumption (VO2max) as a measure of physical fitness, researchers compared subjects’ weight and fitness variables with the results of a periodontal examination done in an afternoon. The problem of undiagnosed dental issues is particularly acute in such communities, according to Itani. And those issues, he says, are much more dangerous to a patient’s overall health than many people realize.

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