Time to listen
In unsteady times, patients might feel more vulnerable, so it’s wise to make sure you’re dealing with your patients in the right way to make them feel comfortable, says Mhari Coxon

You may have noticed that our country is in a bit of a pickle financially just now. I don’t mean to sound glum about this, I am just not sure how to describe the situation. This global crisis will filter down and affect everyone in some way. I am grateful that, working in a service industry, as of yet, my book remains full of regular patients and there is still a steady stream of new clients on our day lists. My pension is looking hellish but thankfully I am a long way off retiring yet. How many patients will be interested in forking out thousands for cosmetic work over the next year or so remains to be seen.

The stress that those not experiencing good fortune in their career must feel is hard to comprehend. Redundancy is on the increase, a four-day week is being bandied around as a solution in a lot of firms, and I am finding more and more people coming in not sure if they will have a job when I see them next. It is not surprising then that clients are apologising for their mouth before they even hit the chair. They know they have not cared for their mouths well since their last session as there have been other things on their mind.

Stress in relation to health
In times of personal crisis, our normal routines can be altered drastically, leaving us vulnerable to all sorts of things. Our eating habits can be less than ideal; we can skip meals and eat convenience food more often. Our alcohol consumption/cigarette use can go up. Our workload increases and we find a new set of priorities which don’t include yoga and flossing. We do not sleep well or exercise enough because we are tired. Illness seems to sneak up easily and linger for longer than it should. When stressed our saliva flow can be significantly reduced, creating a higher risk of caries and periodontal pathogen growth.

Relapse phase
A combination of even a few of these things can tip the balance back in the favour of disease. This often puts our clients into a relapse phase with their maintenance care and we need to support them well to allow them to find some motivation to keep caring for their oral health. We can’t fix the economic downturn, but we can help them survive it without new dental disease.

Using communication skills
And so it is important to remember the communication skills we have. Reassessing the ‘Four Es’ is helpful when relating to our patients. These are: engagement, empathy, education and enlistment.

We need to make sure we are engaging with our patient as they feel now. A person who has been made redundant is a different one to the person we knew in a secure job a few months ago. Reassess the clients’ personal situation in the most empathetic way you can.

Make sure you re-engage with your clients and spend time listening to what they have to say. Empathising with their situation rather than sympathising can help them to feel understood. Giving them some time to tell you how their life has

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changed can be valuable, but also must not dominate the entire appointment.

This communication phase can help to reduce the patients need to be defensive when discussing their oral hygiene with a professional. No one likes to be told off anyway, but even less so when life is pressured. Wagging your finger and saying: 'You should be brushing in the evening you know', is not going to curry favour with the average client just now.

We then have to re-enlist them as supporters of the treatment plan, to ensure their health parameters do not fluctuate out of the boundaries of health. This can best be achieved by using indices to show how things are. Science telling you are in trouble is less offensive than your hygienist telling you off. We have microscopes in surgery, which help us to assess the quality of the clients’ biofilm growth.

Clinically there can often be a reactivation of stable sites at times of stress in clients. This is when regular screening of bleeding, plaque and pocket depths will make it easy to see how the body is coping. I sometimes pop those with a previous history of caries back on high fluoride toothpaste during times of stress as a prevention measure.

Keep disclosing
And so we come back to disclosing each patient. Sometimes it can be a good motivator to kick start their routine. If the patient is not ready to take up the routine of care again, we are better to leave motivational change, and use the disclosing to create a road map for a good disinfection of the mouth. This will help the patient and perhaps they will feel more able to cope by the next maintenance session.

Support through maintenance
The other way we can support our patients is by reducing the time in between their maintenance sessions to help keep them in that healthy zone. If finances are an issue, perhaps shorter sessions, closer together, over the next year would be a good way to support health. Obviously we need to consider the patients financial situation in this too. But, in my clinic at least, you can have eleven hygiene sessions for the same price as one crown so it really is a simple case of insurance. When you put it to patients like that it can help them to understand the need for continued care and how it is an investment in the long term.

Have a look at www.periodontalnutrition.com for some good advice for patients and great information about general health in relation to periodontal health.

Mhari Coxon is a dental hygienist practising in Central London. She is chairman of the London British Society of Dental Hygiene and Therapy (BSDHT) regional group and is on the publications committee of its journal, Dental Health. She is also clinical director of CPDforDCP, which provides CPD courses for all DCPs. To contact her, email mhari.coxon@cpdfordcp.co.uk.

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