Time for a re-call

See low risk patients every two years, dentists are reminded

Dentists are being reminded of their duty to adhere to the National Institute for Health Clinical Excellence guidelines for dental appointment recalls. One point that has caused debate is that dentists in England are reportedly seeing patients more than they need to. According to the briefing, this is in breach of their government contracts.

NICE guidelines state that adult patients should be recalled between three months and two years, "based on a risk assessment, taking into account a checklist of risk factors, such as alcohol and tobacco use" whilst the recommended interval for children is between three and 12 months.

The guidelines also state that "the new dental contract, which will be based on registration, capitation and quality, and remove the need to meet a UDA allocation, is likely to make the implementation of the NICE guidelines easier."

According to reports, England’s CDO, Barry Cockerell, has sent copies of the new briefing to all dentists, stating that the figures from April to September last year show that 15 per cent of patients are being recalled for checks less than three months apart, and that 58 per cent of patients are seen at three-to-nine month intervals - “which means that 21 per cent of people are re-attending within a nine-month period”.

It added that: “Ensuring patients are given an appropriate recall interval is a professional and ethical requirement and helps patients to maintain good oral health.”

A spokesperson for the BDA said: “The NICE guidance on recall intervals represented a significant change for dentists and patients alike. Six-monthly check-ups have been the backbone of NHS dentistry since its formation. The opportunity to see healthy patients to detect disease before it was serious enough to produce symptoms and to institute a regular programme of preventive advice was the norm; therefore it has taken time for patients and the profession to adjust to this change.

“Some patients still have an expectation to be seen six-monthly.

“As you know, the guidance states that the appropriate interval will depend on an individual’s clinical and risk factors - and according to CDO’s letter, the dentist will take a patient’s views on board before making a final decision, so there is an element of agreeing this between patient and dentist.

“Many patients want to see a dentist more frequently (either to pick up problems early, such as gum disease, or for reassurance about their oral health) and dentists have to change patient habits as well.

“The BDA agrees that recall intervals need to be tailored to the individual and based on the risk status of the patient. There are a wide range of risk factors to decide upon the recall interval, including the following major ones:

Smoking or tobacco use, excessive alcohol use, cardiovascular disease, bleeding disorders, anti-coagulants, immunosuppression, diabetes, glucose medications, phenytoin, acid reflux, lack of fluoride, high caries in mothers and siblings, recent and previous periodontal disease, high sugar intake, high acid intake, new decay, anterior fillings, root caries, heavily restored dentition, mucosal lesions, poor oral health, plaque retention factors, low saliva flow, tooth wear, no fluoride, poor attendance pattern, and people with special needs.

“The guidance doesn’t necessarily clarify, ‘how many?’ of the risk factors or ‘how bad,’ these need to be to achieve an ‘at risk’ status, so interpreting what is an appropriate recall period for a given patient may not always be clear cut.”