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## Innovative ideas and approaches for striving the future of dental and oral health care: Emerging demand and cost effectiveness in pediatric dentistry for office-based general anesthesia sedation by dentist anesthesiologists in the United States

Dental decay in children continues to be a significant problem. The World Health Organization reports that, worldwide, 60–90% of school children and nearly 100% of adults have dental cavities. Significant risk factors in children include an unhealthy diet, poor oral hygiene and social determinants. The purpose of this presentation is to discuss the use of officebased general anesthesia, provided by a dentist anesthesiologist, by pediatric dentists practicing in the United States. This information can provide much needed care for the very young child or children with special needs with significant dental decay in a cost effective manner. Pediatric dentists have traditionally relied upon self-administered sedation techniques or the use of general anesthesia in the operating room, to provide care for those patients not able to undergo treatment in the regular office environment. Recent research has demonstrated that the use of dentist anesthesiologists to provide office-based general anesthesia is an emerging trend in the United States. Research findings included: Over 70% of board-certified US pediatric dentists use some form of sedation in their offices; Less than 20% administer IV sedation; 20 to 40% use a dentist anesthesiologist and 60 to 70% would use dentist anesthesiologists if one were available. A review of 750 patients that received dental care under general anesthesia provided by the author was evaluated as to patient age, primary medical diagnosis and American Society of Anesthesiologists (ASA) classification 1 to 3. Candidates for office-based general anesthesia (ASA types 1 and 2) were identified and a basic cost analysis was completed for those receiving care in the operating room as compared to if treatment had been provided in the office environment. Discussion of the results will be demonstrated.

## **Biography**

James E Jones received his DMD from the University of Louisville in 1978 and completed a Residency in Pediatric Dentistry from Indiana University in 1980. He obtained a certificate in Dental Health Services Research. He received PhD in Biological Sciences in 2003 from Empresarial University. He was Dean for the School of Health Sciences, Indiana-Purdue University and is presently Professor and Chair of the Department of Pediatric Dentistry, IU School of Dentistry and Clinical Professor of Pediatrics, IU School of Medicine. He has published over 95 articles, book chapters and research abstracts in the dental, medical and education literature. He has presented over 140 courses in the United States, the Caribbean, Europe and the Middle East on a variety of topics related to higher education. He is Editor-in-Chief for *American Journal of Oral Health and Dental Management*.

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