

The specialist assessment

A BOS position paper

The developing mouth and the specialist assessment

Ten is an important age in a young person's dental development. Many of the baby teeth, or first teeth, have already been lost and the second, permanent teeth are coming through. It is the phase of dental development when abnormalities are picked up at a dental appointment and referred to an orthodontist for an assessment.

The orthodontist makes a diagnosis and decides whether any intervention is needed and reports back to the referring dentist. The most common problem will be a poor bite or misaligned teeth, otherwise known as a malocclusion. There are three types of malocclusion which will require braces at the right time in a child's development.

Other kinds of problems commonly picked up at an orthodontic assessment are:

- Misplaced or impacted canines: this is when the eye teeth are trapped – usually in the palate - and fail to descend as they should. As a result, the primary teeth don't fall out at the normal time, hiding the problem which lies beneath.
- Missing teeth: some children do not have the full complement of teeth, either because they are congenitally absent or due to a rare syndrome

If problems such as these are picked up and dealt with by a specialist, the child may be spared surgery or complicated restorative treatment at a later date. Misplaced canines, for instance, can be dealt with very simply when diagnosed at the right time, simply by taking out the first teeth to make room for the permanent teeth to descend.

On the other hand, if the misplaced canines are not diagnosed until later, they will need to be exposed surgically and then pulled further into place by a brace. Similarly, with missing teeth, if the problem is identified at the right time, the child's remaining secondary teeth can be guided into a new position which, with a bit of specialist help, can disguise the gaps and provide a natural smile.

The British Orthodontic Society believes that all children should have the right to a specialist assessment funded by the National Health Service. Primary Care Trusts which want to adopt a thorough, preventive approach to children's dental health could make it routine for all 10-year-olds in their area to have an orthodontic assessment. This would help reduce the number of patients needing dental treatment and save money in the longer term.

However, BOS are aware that this would require the support of the Department of Health because the numbers of academics teaching orthodontics has dropped to a worryingly low level. Dental undergraduates should receive enough training to identify when children need a specialist assessment. Currently, there is a shortage of academics in orthodontics – there are only 34 full time equivalent orthodontic academics in the UK and they are teaching the entire undergraduate population as well as post-graduates undertaking a specialist training.

Chris Kettler, Executive Secretary for BOS commented: "For many years there has been an effective system of referrals between high street dentists, specialist practices and hospital orthodontic departments and the standard of orthodontics under the NHS has been high. In order for the management of children's dental development to be maintained, workforce planning needs to be a priority. BOS would like to work with the Department of Health to ensure that the dental health needs of current and future generations of children can be met."