

"Oral pathologies – which are in several cases associated with a poor oral hygiene, unhealthy dietary habits and lifestyle and eventually with chronic-degenerative or immunological and infectious diseases – can negatively influence the quality of life of the individuals". That is the way how the Italian Ministry of Health, Prof. Ferruccio Fazio, starts the preface of the issue no. 7 of the "Quaderni del Ministero della Salute", a bimonthly publication published by the Ministry with the general purpose of "promoting an harmonization process in the definition of the guide-addresses which start, develop and go on towards the different sections of the Ministry". In other words it is a periodical for the information and education addressed to share the appropriate criteria of the Italian Health System.

The monography on dentistry "Odontoiatria di comunità: criteri di appropriatezza clinica, tecnologica e strutturale", (http://www.quadernidellasalute.it/quaderni-html/7-gennaio-febbraio-2011.php) was presented in a dedicated congress which was held on the 29th of March 2011 in the Ministry of Health, in Rome. It was a unique event of that kind also because, for the first time, a topic such as the dentistry for the community was the subject of a wide discussion within the institutional frame of the Ministry.

The publication, which is the result of the work by Silvio Abati, Alberto Barlattani, An-

gelo Calderini, Roberto Callioni, Mario Capogreco, Giuseppe Gallina, Gabriella Carluccio, Enrico Gherlone, Alessandro Ghirardini, Ambra Michelotti, Michele Nardone, Fabrizio Oleari, Filippo Palumbo, Stefano Petti, Antonella Polimeni, Elisabetta Polizzi, Giovanni Simonetti, Laura Strohmenger, Luca Tognana, Tullio Toti e Roberto Weinstein, has the main purpose of giving some precise directions on the standard interventions in the field of prevention and care of the most common oral pathologies, and also on the most appropriate organizing paths for the public and private health care workers involved in fulfilling the needs of health.

The publication deals with several themes, starting from the **epidemiological situation** in our Country regarding the main pathologies of the oral cavity such as tooth decay, periodontal disease, edentulia and cancer. Particular importance has been given to the epidemiological part; from derived data it is possible to get a precise evaluation of what has been realized, till today, from the public service in order to fulfill the demand for dental services, and of how much it is still necessary to do in order to organize the offer, in particular the public one.

The same data bring us to pay a greater attention to the prevention of the most common oral pathologies, especially during the evolutive age, considering the validity of the fact that the promotional actions of the oral health (when they are performed in that age) are most efficient and do allow the implementation of virtuous and durable habits.

Therefore, particularly at governamental level, it is compulsory to incentivate and to favorite any **plans for the prevention** of tooth decay, periodontal disease and cancer, considering that, since several risk factors for the oral cavity diseases (eg. bacteria, inadequate diet, smoking, unhealthy lifestyle habits) are common also for other chronic-degenerative diseases, each action of prevention which becomes operative has to be considered as a larger action addressed to the promotion of the global health of the individual.

During the last years, in order to incentivate the above mentioned actions, the Ministry of Health has also promoted the definition and diffusion of **Guidelines**, meaning recommendations and "evidence-based" directions, supporting the daily work of the health care workers belonging to the "oral health field".

In the above mentioned monography, according also to the previous comments, it has given particular importance to the **dental hygienist role**, which is both a professional figure supporting the dentist daily activities, addressed to the assistance for the good oral health status, and which is also an important health operator for planning the correct prevention paths, starting from the prenatal age.

The Authors have, then considered as a moral duty to focus on the **infections in odontostomatology**. In fact, the reduction of the biological risk of transmission between patients and health workers, during the health services performed, in order to guarantee

the safety of each individual, it represents a moral duty for every health care worker. In dentistry the greatest risk of transmission of infectious diseases is connected with blood transmission and secretions: in both cases the transmission can occur either because of a direct contact or for an emission into the environment, through the water collector or through the air conditioning system which can contain opportunistic pathogens. Generally speaking the health care worker is much more exposed to the risk of infections than the patient who is particularly exposed to some risks when the health care worker has a disease or some bloodborne infections. As a consequence the paper gives the rules which have to be applied in order to keep an efficient control on the infections in dentistry. Mainly they are based on the Recommendations given by the European Union Council on the hospital infections control, on the Guidelines by the European Commission for the application of the "precaution principle", on the Guidelines for the control of infections produced by the Atlanta Centers for Disease Control (CDC).

The paper focuses on the **diagnostic pro-tocols** and on the **health care paths** aimed to the resolution of the most common pathologies of the oral cavity.

Nowadays, for diagnosis there are some well codified paths – which do have a proven efficacy – going from the general medical anamnesis to the specific stomatologic anamnesis to the extra- and intra-oral objective exam, to the radiographic investigations, to the photographic documentation and to the exam of the models of study. In the same way, the resolution of pathologies in dentistry is based on some standar-

dized health care paths which, when applied

always respecting the individual characteristics, do allow the best possible specialistic treatment.

One chapter of the paper is dedicated to the **dental health care assistance** in our Country, which is basically provided by private professionals.

On the contrary, the public service has different levels of performance and coverage in each different Italian region: it mainly takes care of patients in the evolutive age (0-14 years), and of persons in a difficult social and/or health situation. Additionally every citizen with an antalgic-infective urgency can find a solution by the public health care service.

The overall volume of dental health care services performed by public structures – or by private structures accreditated by the National Health System (SSN, *Sistema Sanitario Nazionale*) – is equal to 10% (approximately 4,600,000 performances in ambulatory services to be added to 170,000 performances in day hospital or in ordinary hospital admission) versus 90% of health care dental performances in the private field.

The public National Health System structures perform services mainly requested by citizens in difficult social situations and by aged patients; the most frequently asked treatments are tartar ablation, conservative restorations, and extractions, mainly of dental elements in bone inclusion. In particular, in the public field people with sistemic pathologies are those requesting for the greatest number of odontostomatologic surgery services. Also it is very high the request for orthodontic services in the evolutive age. Another topic in the paper are **Integrative** Health Funds approved by the Law Decree n. 502/92 and revised by the Decree of the Ministry of Health dated May 31, 2008. The purpose of the Funds is preserving the features of solidarity and universalism of the public health system, encouraging at the same time the coverage by integrative health care services, including the odontostomatologic services. In other words, the full implementation of the Funds Institute it should be facilitated the access to the dental health care services for a greater number of citizens, since they will be able to get either a partial or a total reimbursement of the costs connected to a specific dental service, and, at the same time will be able to freely choose the doctor, the dental firm, the public authorized structure.

With reference to the ways and methods for financing the funds, this is still in a phase of study.

"The greater access to the dental services, fostered by the implementation of this law, which the legislator meant as an instrument for integrating the public services, will facilitate the spread of a culture of oral care which is unfortunately still lacking in our Country".

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