



## Introduction

Neurodivergent patients (ND), or those with special health care needs, can include: “any physical, developmental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, health care intervention, and/or use of specialized services or programs”.<sup>[1]</sup> The CDC estimates that 17% of children- equivalent to 1 in 6 children- aged 3-17 have a developmental disability.<sup>[4]</sup> Accessing dental care can be challenging for ND patients due to a nationwide shortage of pediatric dentists, who are the primary providers for this population.<sup>[5]</sup>

Dental care represents the most significant unmet healthcare need for ND patients.<sup>[2]</sup> There are notable disparities in access to dental services for patients with disabilities compared to their neurotypical counterparts including prioritization of other health care needs, difficulties finding a provider, living in a rural area, transportation issues, financial constraints, and emotional or physical issues faced by their caregiver.<sup>[2]</sup> A survey of general dentists revealed that only 10% treat ND patients, and 70% reported that they rarely or never do.<sup>[3]</sup> The primary obstacle for ND patients transitioning from pediatric to adult dental care is finding a willing provider.<sup>[3]</sup>

This population is much more likely to need dental care due to increased caries rates, periodontal disease, and oral health needs related to their condition. Common oral health concerns include: malocclusion, tooth malformation, tooth decay, trouble with brushing or flossing at home, reliance on caretakers for oral health prevention, crowding, periodontal disease, increased rates of oral trauma, food pouching, mouth breathing, tongue thrusting, enamel defects, delayed tooth eruption, and xerostomia.<sup>[7]</sup> Moreover, around 30% of cleft lip or palate cases are linked to syndromes and 200-400 syndromes feature cleft lip or palate as a symptom.<sup>[6]</sup>

This research investigates children aged 2 to 13 in the Bronx, New York, an urban setting. It highlights that children with special needs face an elevated risk of dental diseases, necessitating accessible and consistent dental treatment.



## Study Objectives

This study aims to identify the obstacles ND children face in accessing dental care. It will also compare the ease of obtaining medical versus dental care for these patients and explore parent's views of the importance of dental care for their ND children.

## Methods

### Subjects

Mothers of ND patients ages 2-13 were the subjects of this study. A total of 50 subjects completed the survey. Subjects were recruited at SBH Health System.

Condition	# of participants
Patients with more than one condition	8
Autism	30
ADHD	16
ADD	2
ODD	5
Anxiety	3
Psychosis	2

### Patient Selection

**Inclusion Criteria:** Parents with ND children between the ages of 1-18, with conditions such as: Down Syndrome, Autism, ADHD, Cerebral Palsy, Muscular Dystrophy, Tourette's Syndrome, Anxiety, Psychosis, blindness, or similar conditions. Other demographic factors, including gender and ethnicity, will not be used to determine inclusion.

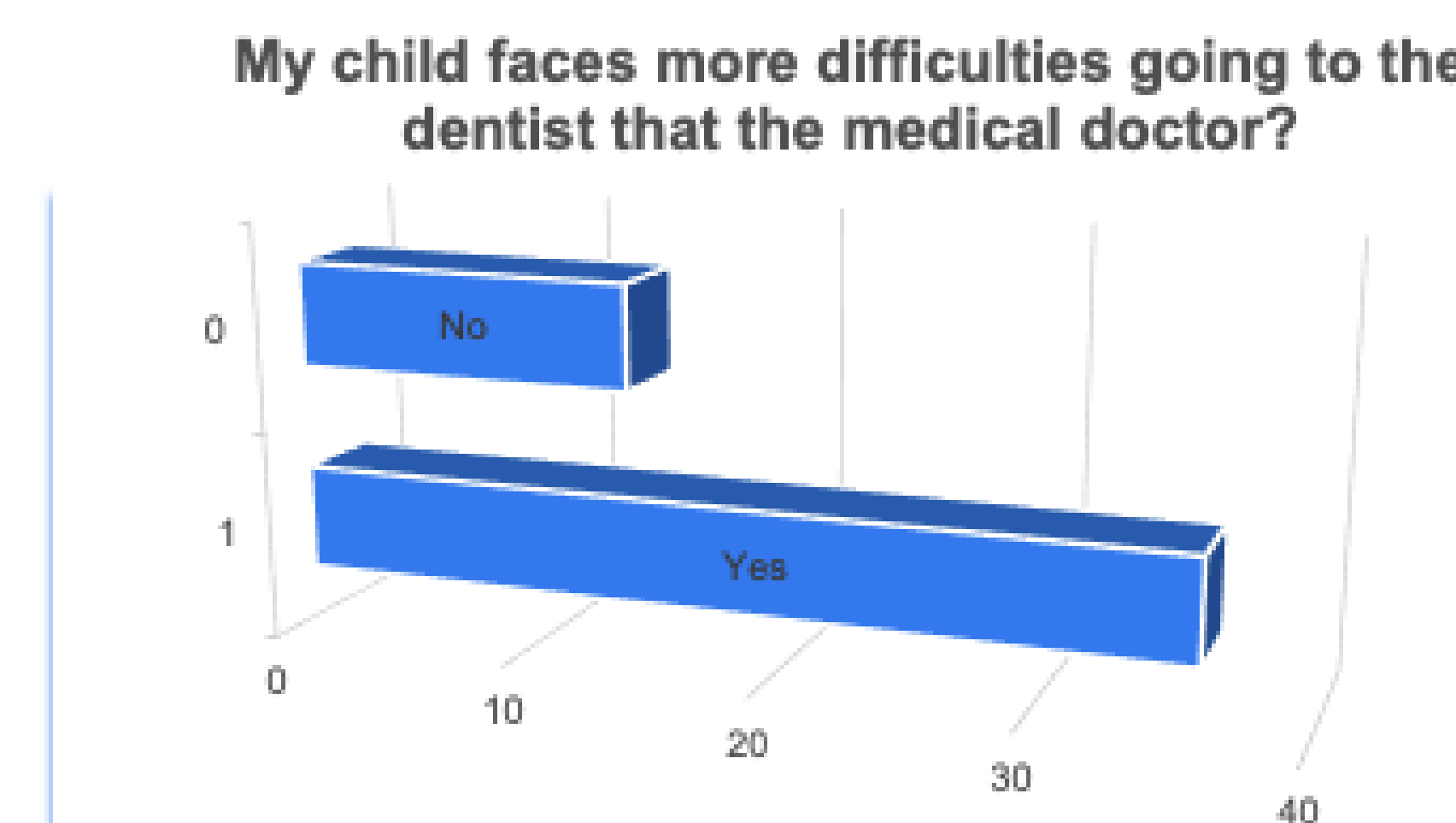
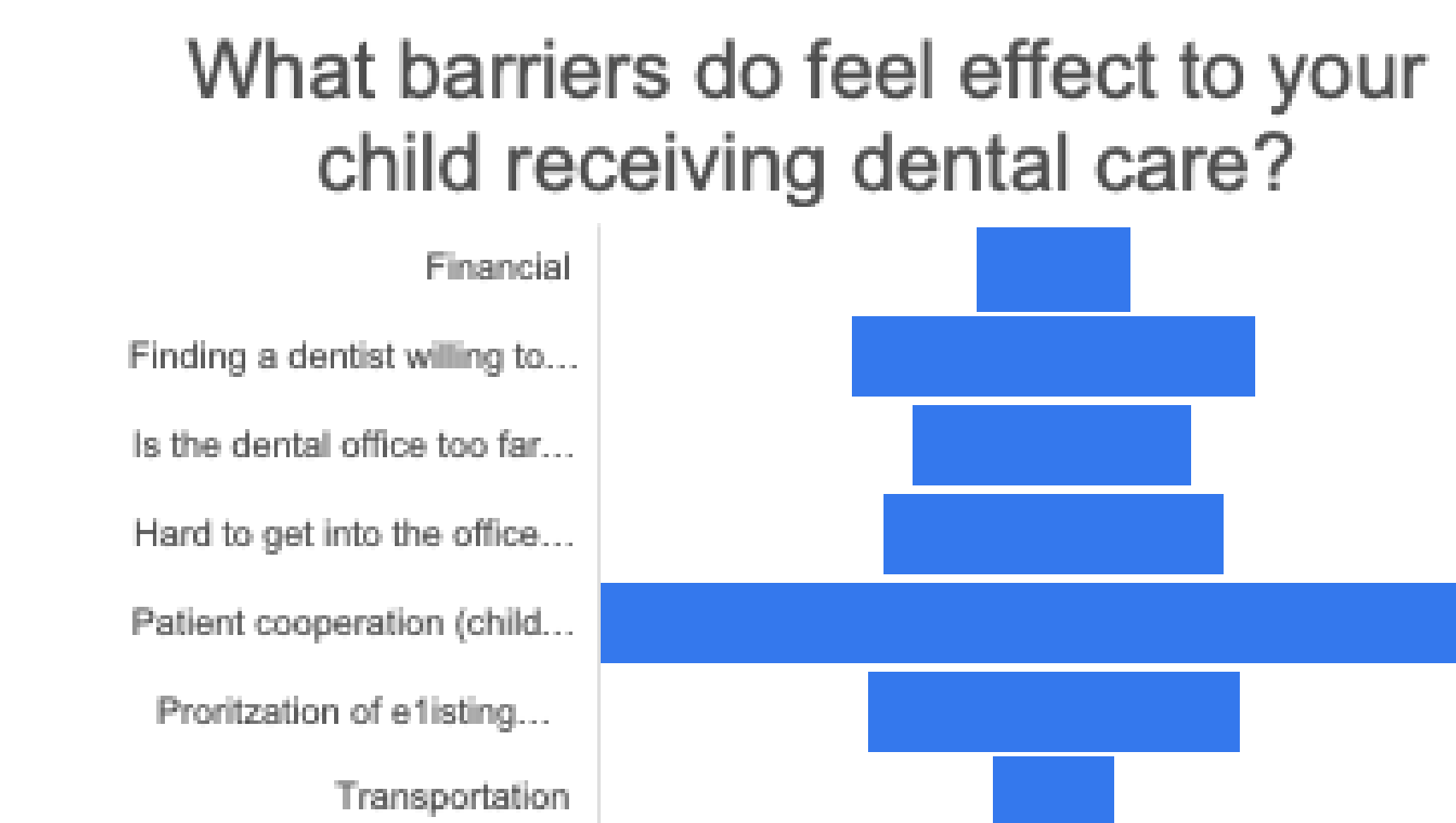
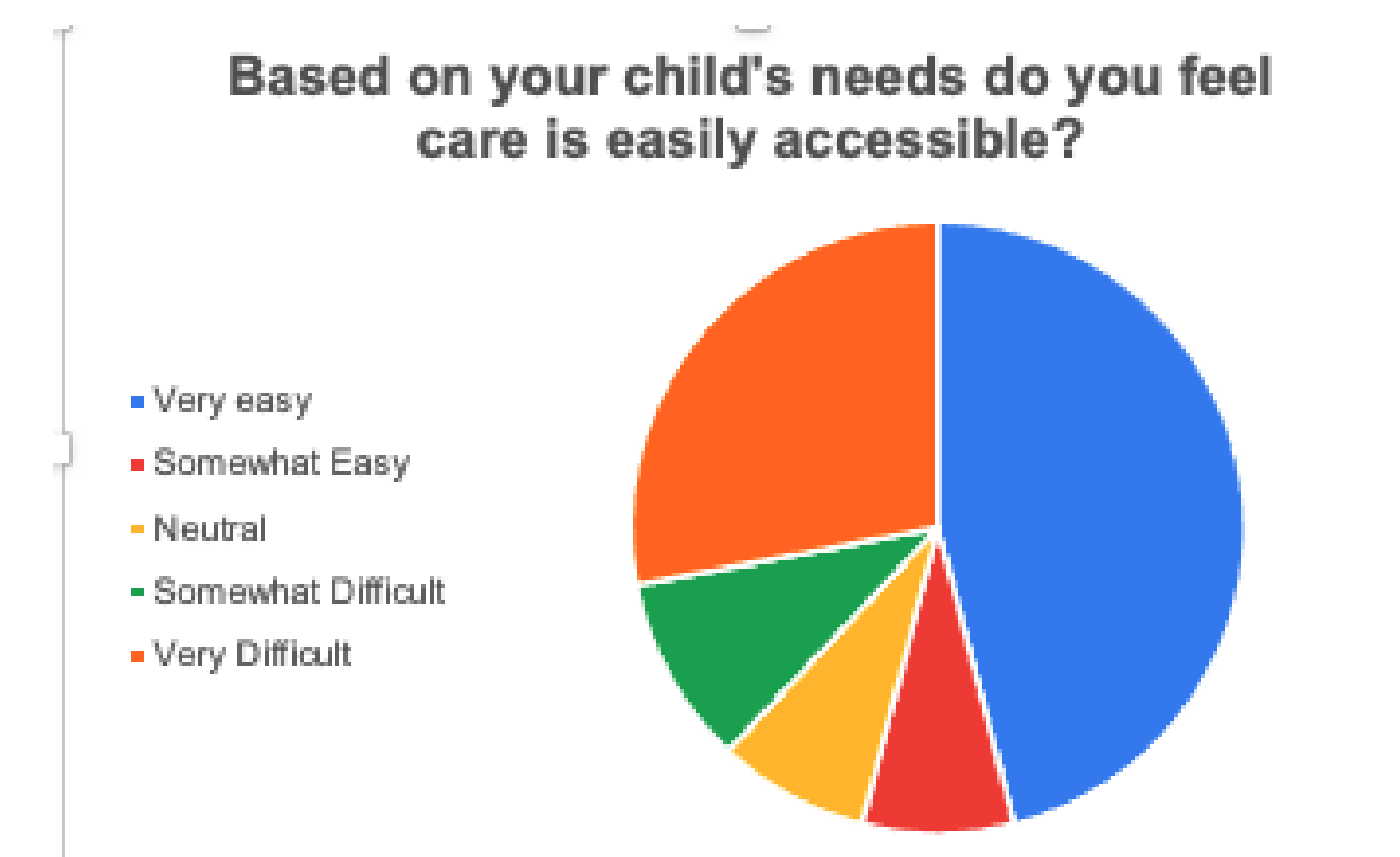
**Exclusion Criteria:** Parents of children who are either over 18 years old or under 1 year old, as well as parents of neurotypical children.

### Data Collection

Participants were given a confidential number linked to their survey responses. Parents filled out the survey, and the results were recorded in a secure manner. The survey was provided in English and Spanish. The survey consisted of six questions as follows:

- Based on your child's needs do you feel dental care is easily accessible? Answers: Very easy, Somewhat easy, Neutral, Somewhat difficult, Very difficult
- What barriers to care do you feel effect your child? Answers: Financial, Finding a dentist willing to see your child, Transportation, Long distance to the dental office, Hard to get child into the office (no ramps, etc.), Patient Cooperation, Prioritization of existing medical care
- How important do you feel dental care is for your child? Answers: Very important, somewhat important, Neutral, Not important
- My child faces more difficulties going to the dentist than the medical doctor. Answers: True, False
- What would improve the barriers to your child receiving dental care?
- What is your child's diagnosis?

## Results



## Discussion

All parents surveyed agreed that dental care is crucial for their children. However, they find it more challenging to take their ND child to the dentist compared to a medical doctor. In fact, 72% of parents believe that visiting the dentist is more difficult for their ND child than visiting a physician. Despite these challenges, parents feel they can still secure dental care for their children, with a significant trend indicating that obtaining dental services at SBH is quite straightforward, but 38% of parents report it is difficult to find care. The main obstacles to care include patient cooperation, locating a dentist willing to treat the child, and prioritizing existing medical care.

Dentists must continue to enhance and apply effective behavior management techniques, including advanced methods like sedation, to better serve ND patients. There is a need for more dentists to receive training in treating ND individuals, ensuring they feel comfortable and capable in providing adequate care. This training should begin in dental schools, which should incorporate a rotation focused on special needs dentistry and should extend into continuing education programs. It is essential for medical doctors to collaborate with dentists to provide families with a list of dental offices that can serve as their dental homes.

## Conclusions

Care for patients with special needs has significantly improved, narrowing the divide between how parents perceive medical doctors compared to dentists. With further training, we can swiftly and effectively bridge the gap and remove obstacles to care.

## Study Limitations

Small sample size and short duration of research  
Limiting to only SBH patients, need more demographics, with more patients utilizing private insurance or self-pay.  
The study does not include anyone living in suburban or rural areas.  
This study does not contain neurotypical patients.

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