# Novel curriculum of smoking cessation for dental students

A consideration for the program planning using RE-AIM



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歯学生・歯科衛生学生のための臨床タバコ介入教育

### 1. Background

- During the latest three years, smoking cessation interventions have been included in;
- 1. the Guidelines of Contents for Dental and Dental Hygiene Education, and
- 2. the National Board Dental and Dental Hygiene Examinations.
- History of smoking was also included as an independent item among practices of the Medical Interviewing.

最近、歯科教育内容項目に禁煙介入が導入された2

### 2. Aim

National policy of dental and dental hygiene education of tobacco-use interventions has been established.

The aim of my presentation is to propose new strategy of dental and dental hygiene education of tobacco-use interventions that may be successfully implemented and maintained in all dental and dental hygiene schools as early as possible in Japan.

タバコ介入能力の育成の教育の制度が整った

### **3. Literature Review**

The committee of tobacco-free initiative of the Japanese Society for Oral Health (JSOH) reviewed literatures regarding tobacco interventions by dentists and dental hygienists.

Review ArticleJapanese Dental Science Review, 2013Tobacco interventions by dentists and dentalhygienists

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Dental professionals have not fully embraced opportunities for tobacco-use intervention.

### 歯科専門家は介入機会を十分活かしていなかった4

### 4. Reimbursement Issue

- Lack of training was significant barrier of tobacco intervention practice that was consistently reported. <u>This finding supports</u> needs of undergraduate education.
- Another barrier was lack of reimbursement.
- → This finding suggests need of specific strategy for implementation to dental education because the universal health insurance in Japan does not cover preventive services.

訓練不足と報酬がないことが主要な障壁だった

### 5. Implementation Issue

# Survey of <u>dental schools in 2005</u> by the committee of the JSOH revealed minimal

#### implementation in clinical education (4/29).



Clinical education program that can be promptly implemented is required.

早く導入できる臨床歯学教育プログラムが必要

### 6. Receptiveness issue

- The nationwide survey was conducted in 106 dental clinics in 2010.
- Patients were receptive to intervention for prevention of oral diseases, while less than 40% were concerned about effects on disease progression and dental treatments.
- This finding suggests needs of specific strategy that focus on the effects on disease progression and dental treatments.

喫煙と疾病進行及び歯科治療との関係も重視する7

### 7. Learn from education in the U.S.

- We are reviewing literatures of undergraduate education of dental tobacco-use intervention using the RE-AIM framework for planning.
- Reach, Effectiveness/Efficacy, and Adoption components would be OK in Japan.
- We should strengthen the Implementation and Maintenance components for planning education program of clinical smoking cessation interventions.

禁煙介入教育実施には導入と維持の要素が重要

### 8. Effects on oral biofilms (P-S3-01)

Another review of literatures identified recent findings regarding <u>effects of smoking and</u> <u>smoking cessation</u> on oral biofilms including asyet uncultivated organisms and <u>effects of</u> <u>tobacco extracts</u> on virulence factor of periodontal pathogens.

Smoking cessation interventions are now within the concept of oral biofilm control, and the intervention could be interpreted as treatment modality of oral diseases.

タバコ介入は口腔バイオフィルムコントロール治療。

### 9. Educational module - conclusion

- Plaque control has been well recognized and accepted, and already established procedure.
- Public awareness of <u>oral biofilms</u> as potential pathogen of overall health is increasing.
- → Education of smoking cessation interventions based on dental treatment, for example, extension of the educational module of plaque control would be promising strategy that reinforces the interventions for <u>oral and overall health</u> in Japan.

禁煙は、愛のプラークコントロール治療です

### Example of protocol in education

- 1. Relate his/her oral problems to plaque control.
- 2. Ask about toothbrushing and smoking history.
- 3. Advise to improve toothbrushing, and, in case of current smoker, to quit smoking.
- 4. Assess willingness to improve plaque control including smoking cessation.
- Adapt willingness to regimens of toothbrushing and/or smoking cessation.
- 6. Assist/Refer, and Arrange follow-up of both.

プラークコントロール手順の延長で教育する例