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Survey on the Attitudes of Endodontists Towards Treating Pediatric Patients in Office

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LEARNING OBJECTIVES

1. To evaluate how endodontists handle referrals for treating pediatric patients for root canal therapy.
2. To assess the perceptions of endodontists towards treating pediatric patients
3. To assess the utilization of behavior management techniques by endodontists treating pediatric patients

INTRODUCTION

- Pediatric patients in need of endodontic therapy typically have difficulty accessing care.
- Numerous reasons may account for why endodontists prefer not to treat pediatric patients in office, such as, time required, reimbursement rates, behavior management, sedation training, and hospital privileges.
- Endodontic treatment for pediatric patients covered by Medicaid has inconsistent reimbursement rates in most US states, which makes the cost of treatment not as effective for dental practitioners.
- Most endodontists on average also admitted to not feeling prepared to treat patients requiring behavior management techniques which is typically necessary with the pediatric population.
- This study will hopefully shed light on how we can best manage to treat these patients and prevent unmet needs in our pediatric population.

METHODS

- A cross-sectional study was conducted that included an online survey questionnaire of Endodontists practicing in the Southeastern region of the United States from December 2, 2021-January 25, 2022.
- The survey comprised of 19 questions designed to gather statistics regarding endodontists attitudes towards treating pediatric patients and to evaluate if there is a disparity in treatment among this population.
- The data was analyzed to assess perceptions by location, gender, duration of practice, and referral sources.



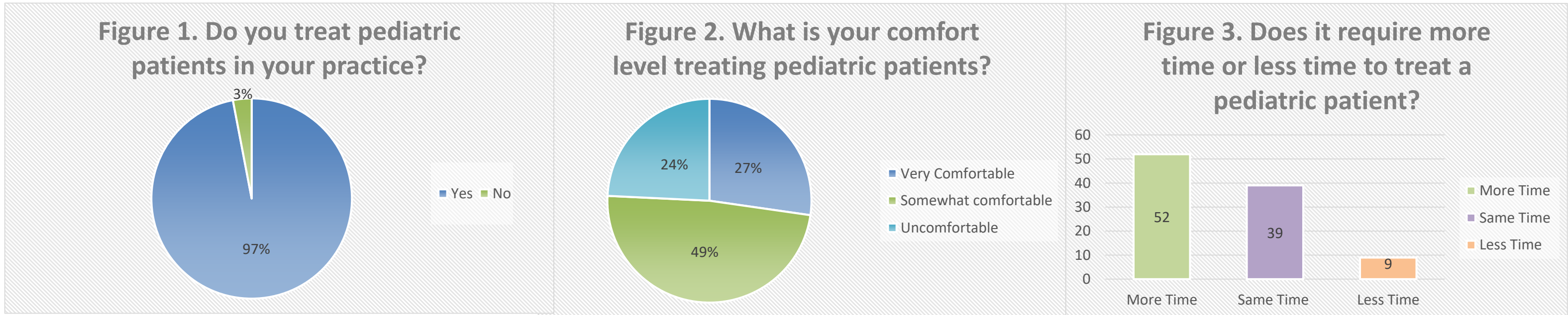
PURPOSE

To evaluate the attitudes of endodontists towards treating pediatric patients and how they handle referrals for treating pediatric patients for root canal therapy requiring behavior management techniques.

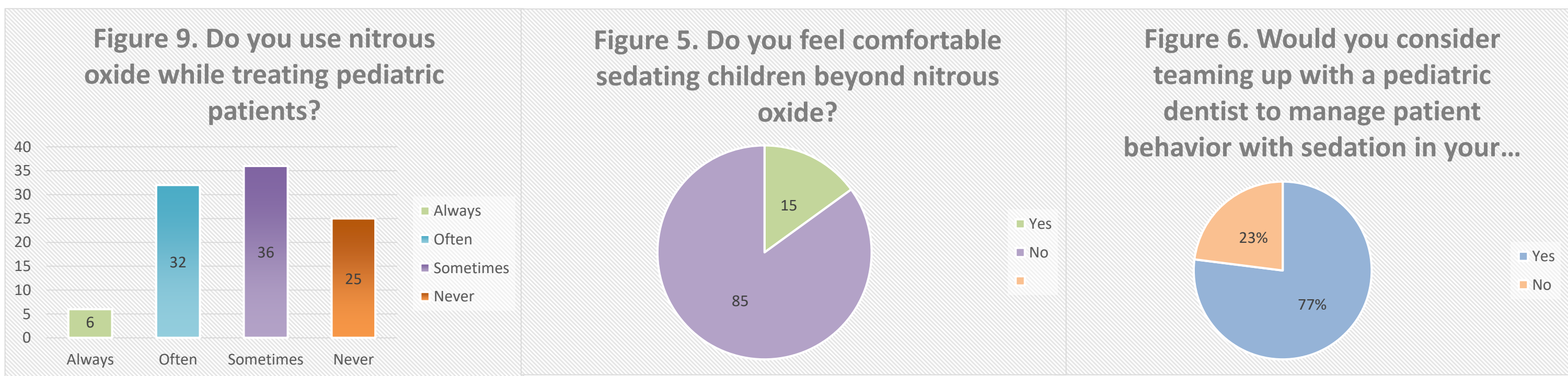
RESEARCH HYPOTHESES

I hypothesize that most endodontists prefer not to treat pediatric patients that require behavior management in office.

RESULTS



- The survey’s return rate was 3.7% with a total of 117 responses
- The distribution of endodontist respondent’s identified as male was 72% and as female 26%.
- Endodontist’s responses were divided among practice location, such as, urban cities (26%, n = 29), suburban cities (71.1%, n = 79), and fewer respondents indicated their practice was located in a rural area (2.7%, n = 3).
- Most of the endodontists who responded practice in private practice (89%) with 3.5% practicing in academia and 5% reporting to both.
- The majority of endodontists reported on evaluating and treating children (ages 7-14) in a given year (97%) and only a few reported treating no children within a given year (3%). Of the 97% who reported to seeing pediatric patients: 71% reported to seeing at least six patients or more a year. 26% reported to seeing less than 6 patients in a given year.
- When asking surveyed endodontists their comfort level while treating children the majority reported a “somewhat comfortable” response rate of 48%. Others noted a 27% response rate of “very comfortable” and 24% reported as “uncomfortable”.
- When asked if endodontists if it would require more or less time to treat a child or an adult with a comparable dental diagnosis, the majority answered that it would require more time to treat the child (52%), followed by 39% with the same amount of time and 9% with reported less time.
- When asked if the endodontist respondents used nitrous oxide while treating pediatric patients - 6% reported “Always”, 32% - “Often”, 36% - “Sometimes” and 25% reported “Never”.
- Majority of the endodontists surveyed did not receive specialty training during residency to treat children
- The survey revealed that many endodontists are open to the idea of partnering with a pediatric dentist in office to treat this population



CONCLUSIONS

- Endodontists are treating pediatric patients regularly basis and many do not feel comfortable treating these patients that may require behavior guidance to perform ideal treatment.
- Specialty training for endodontists may be an area that can be explored to better equip endodontists to feel more trained to treat children in their community with endodontic needs. Incorporate pediatric behavior management techniques within endodontic residency programs may be beneficial to increase the comfort level of these practitioners with nitrous, sedation, and/or general anesthesia.
- The survey revealed that many endodontists are open to the idea of partnering with a pediatric dentist in office to treat the needs of our pediatric population

ACKNOWLEDGMENTS