

EDITORIAL



DOI: 10.2478/asmj-2022-0007

Interdisciplinarity: decision-making factor in modern dental therapy.

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The classic and modern methods and techniques of detection, diagnosis, and treatment of odonto-periodontal lesions need a material support, which allows obtaining restorations made correctly from a morphological and functional point of view.

The knowledge of the latest discoveries in the field, the correct acquisition of knowledge about how to use novel materials, but also of the specific indications, are indispensable elements for the practice of dentistry in the modern era. The development of theoretical ideas in close coordination with technical advancement may be the key to a competent and high-quality medical act.

An appropriate examination of the oral condition based on the patient's complaints is followed by a thorough evaluation of the odontogenic, periodontal, and radiographic signals as well as additional diagnostic components like mounted casts and pictures.

Based on the patient's vision and goals for their oral health and the evidence of prognosis of the treatment options from existing research, the final treatment plan synthesizes these factors.

Making decisions is often difficult due to the plethora of indicators, symptoms, and options [1].

The management of patients' health depends on a number of oral-systemic health interactions. Oral diseases and conditions have an impact on systemic health, as do systemic diseases and conditions [2,3].

Tooth loss, intraoral infections, and periodontal diseases are all examples of oral diseases and conditions that have been linked to poor overall health [4].

Intraoral infections can cause facial and periorbital cellulitis, which can lead to cellulitis within the facial planes of the neck, which can compromise the airway, sinusitis, and bacteremia, thus causing harm at distant sites [5].

Patients who have untreated or poorly managed oral problems such as dental decay, oral discomfort, tooth loss, loss of oral function, halitosis, and cosmetic dental health may experience social stigma, lowered self-esteem, loneliness, and depression [6].

There are numerous and intricate connections between dental health issues and overall wellness. Oral health is impacted by systemic disorders, either directly through pathological pathways or indirectly through behavioral changes brought on by illness or treatment. Systemic health is affected by changes in dental health. Losing teeth is directly related to losses in quality of life, and mortality from cardiovascular illnesses. As a result, the now-recognized link between oral health and systemic health emphasizes the necessity of many healthcare practitioners incorporating oral health care into the management of general health care [7].

One prerequisite for endocarditis is bacteremia, which is the introduction of germs into the bloodstream. Any mechanical activity on the skin or mucosae can trigger it. Both the volume and the frequency of bacteremia coming from the mouth cavity are influenced by how invasive the mechanical action is and how much the hard-soft tissue interface is inflamed. Even in those at high risk, the majority of bacteremia does not result in endocarditis. However, in high-risk patients

the likelihood of endocarditis will rise the more frequently and strongly bacteremia occurs [8].

A consultation in health care is a discussion between health care or other service professionals to seek direction and clarification, exchange pertinent data and clinical findings, notify other members of the interprofessional team of discipline-specific issues, and go over diagnosis, prognosis, treatment options, and patient management options for a specific patient. For instance, the condition of gastroesophageal reflux is linked to dental caries and tooth degradation because of recurrent exposure to acidic gastric contents. Dentinal hypersensitivity, poor aesthetics, sharp teeth that can lead to mucosal ulcerations, changes in occlusion with time, and changes in vertical dimension are all effects of erosion [9].

As members of the multidisciplinary health care team, registered dietitians provide medical nutrition therapy in an effort to treat and prevent diseases. Malnutrition may be caused by both direct and indirect links between poor dental health and nutrition, and vice versa [10].

Specialists can work together to provide screening, information, and referral to one another as part of an all-encompassing treatment plan because oral health and nutrition are mutually supportive [11].

Additionally, dentists can inform dietitians about the potential risk of dental caries posed by various liquid dietary supplements that are frequently included to increase calorie, fiber, and protein intake as well as to supply vital nutrients that could otherwise be lacking [12].

Periodontal diseases are usually associated with a systemic disease. Thus, smoking, stress, aging, chronic inflammation, and genetics are all risk or modifiable factors for both periodontal diseases and systemic conditions [13].

The prevalence of tooth loss and edentulism has been increased reportedly in the case of patients diagnosed with systemic conditions: chronic cardiovascular diseases, nephropathy, cancer, osteoporosis, and neurological diseases [14].

To allow a better treatment for patients with complex pathology multiple dental specialties need to perform together. Greater patient demands and more difficult treatment options are a result of longer life expectancies, better-quality biomaterials used in dentistry, and the quick evolution of clinical practices. In order to achieve therapeutic goals and deliver effective therapy for functional rehabilitation and cosmetic enhancement, it demands holistic management, which frequently requires doctors to collaborate in a multidisciplinary approach [15].

In terms of contemporary dentistry, endodontics, orthodontics, prosthetic dentistry, and periodontics have a close and intertwined interaction with other specialties in terms of treatment planning, procedure execution, results, achievement, and maintenance [16,17].

The dental interdisciplinary treatment is an organized cooperation between various clinicians involved in patient care. Today, it is common knowledge that no specialty can be practised in isolation because there are usually several treatment options that can increase patient satisfaction and clinical predictability for practically every case [18].

The development of an interdisciplinary approach creates a traditional link between different dental specialties that must coexist for the patient's overall health. Sharing an intimate and unbreakable bond with other dental specialties as well as with other professionals should be expressed in many parts of daily dental practice, starting with the treatment plan, procedure execution, outcome accomplishment, and long-term maintenance. Every stage of clinical dentistry is closely linked to a single goal.

In a comprehensive, interprofessional approach to patient care, the preservation and maintenance of the natural dentition in healthy conditions is of utmost importance [19,20].

Conflict of interest: None to declare.

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