CASE REPORT

Pediatric Dental Neglect: Why Delinquency by Parents? A Revelation

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ABSTRACT

Neglect, in general, and dental neglect, in particular, are the least known and detected types of abuse, even though they are the most frequent ones. Child neglect occurs when a parent or guardian either deliberately or unintentionally permits the child to experience suffering or fails to provide the necessities for the child's physical, emotional, and intellectual development. The present paper reveals a case of dental neglect in a 4-year-old girl child. It describes the importance of the detection, intervention, prevention, counseling, and education of the parents regarding the ill effect of poor dental health on the overall health.

Keywords: Behavior negligence, Dental neglect, Dentists, parents, Poor oral hygiene

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INTRODUCTION

Dental neglect, as defined by the American Academy of Pediatric Dentistry, [1] is "the willful failure of parent or guardian to seek and follow through with treatment necessary to ensure a level of oral health essential for adequate function and freedom from pain and infection." Dental caries, periodontal diseases, and other oral conditions, if left untreated, can lead to pain, infection, and loss of function. These undesirable outcomes can adversely affect learning, communication, nutrition, and other activities necessary for normal growth and development. [1]

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Failure to seek or obtain proper dental care may result from factors such as family isolation, lack of finances, parental ignorance, or lack of perceived value of oral health.^[2] The point at which to consider a parent negligent and to begin intervention occurs after the parent has been properly alerted by a health-care professional about the nature and extent of the child's condition, the specific treatment needed, and the mechanism of accessing that treatment.^[3]

The physician or dentist should be certain that the caregivers understand the explanation of the disease and its implications and, when barriers to the needed care exist, attempt to assist the families in finding financial aid, transportation, or public facilities for needed services. Parents should be reassured that appropriate analgesic and anesthetic procedures will be used to assure the child's comfort during dental procedures. If, despite these efforts, the parents fail to obtain therapy, the case should be reported to appropriate child protective services. [1,3]

In general, neglect represents the failure to perform essential parental duties, such as supervision, nurturing, and protection of the child. It is useful for the dentist to consider child dental care as a continuum, ranging from excellent to adequate to neglectful. Likewise, the individual child's dental health may range from excellent to mildly diseased to severely diseased. In individual cases, the state of the child's health may or may not be related to the level of care provided by the parent or the guardian. Barriers to care can be recognized. Often the best intentions can be negated by poverty, ignorance, or lack of access to adequate care.

Negligence in parental care often is manifested by levels of dental hygiene insufficient to prevent disease. Overt mistreatment, on the other hand, generally results in physical trauma to the mouth and the teeth. Dental neglect, therefore, can be identified by the presence of obvious oral disrepair coupled with the parents' failure to provide adequate dental attention.

CASE REPORT

A 4-year-old girl came to the department of pedodontics and preventive dentistry with the chief complaint of pain in her upper teeth region for 1 month. On clinical inspection, it was found out that she had a very poor oral

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Figure 1: Extraoral examination of the patient



Figure 2: Intraorally maxillary arch showed multiple carious teeth



Figure 3: Intraorally mandibular arch showed multiple carious teeth

hygiene and almost all her teeth carious [Figures 1-3]. On asking about her brushing practice, she told that she never used a brush or anything to clean her mouth and was not even aware of it. The girl was accompanied by her neighbor who revealed that she came with the patient because the girl's parents were not bothered about their child's health and well-being. The girl had

four other siblings, and she was the middle child. The parents had poor social status and were uneducated which lead to the neglect of their child's overall and dental health. The parents were informed and called for the meeting with the pedodontist the other day and were counseled and educated about the importance of dental health care. The child is now getting treatment for her oral rehabilitation free from any costs in the pedodontics department.

DISCUSSION

The academy's definition of dental neglect assumes that the oral pathology is evident to the parent or the guardian, i.e. a layperson. The following indicators have been suggested as aids in the identification of dental neglect in children:

- 1. Untreated, rampant caries that is easily detected by a layperson.
- 2. Untreated pain, infection, bleeding, or trauma affecting the orofacial region.
- 3. History of a lack of continuity of care in the presence of previously identified dental pathology. [4,5]

An accurate, complete, and sensitively obtained dental history is essential in confirming suspicions of neglect. A common factor in neglect cases is the failure of the parent or guardian to obtain appropriate care for the child following identification of serious dental pathology.

Although there are a variety of causes, studies have shown that there are links with parental ill-health, substance misuse, domestic abuse, unemployment, and poverty, with neglectful families often experiencing a combination of these adverse factors. Studies have also reported that neglectful families often have a number of attributes including an inability to plan, lack of confidence about the future, difficulty with managing money, emotional immaturity, lack of knowledge of children's needs, a large number of children, being a teenage mother, high levels of stress, and poor socioeconomic circumstances. [6]

Types of dental neglect are as follows: ^[7] Active neglect - intentional failure of parents or guardians to fulfill their caregiving responsibilities, passive neglect - unintentional failure of parents or guardians to fulfill their caregiving responsibilities because of knowledge, illness, infirmity, finance, or lack of awareness of available community support/resources, and self-neglect - a person's inability to provide for his or her own needs because of physical, mental, or developmental disability or any combination of these.

Dental neglect can also be classified based on the type of care. [8]

Dental prevention neglect - It is defined as the neglect of the prevention of oral disease which results

in the experience of dental conditions (measured by treated and untreated dental caries and/or traumatic dental injuries and/or dental pain).

Dental treatment neglect - It is defined as the neglect of necessary dental treatment that results in the experience of untreated dental caries and/or traumatic dental injuries and/or dental pain.

Role of parents and caregivers, dentists, and other health professionals has a crucial role in intervening, preventing, detecting, and managing the dental problems. Parental involvement, through preventive services, is a basic concept in children oral health care. [9] Their involvement enhances children oral health status.[10] Up to the age of 7 years, it is still the responsibility of the parents to be engaged directly in their child's daily oral hygiene practices.^[11] In fact, parents' attention in respect to child oral hygiene is one indicator of their interest to provide the child with essential requirements of well-being. Moreover, children are largely dependent on their caregivers to access dental treatment. Thus, to achieve a good result, the parents have to be involved in dental care. Dentist on the other side should be well aware of the signs of dental neglect, [12] not only as a concern in itself but also as it may be an alert of general neglect. They can improve family knowledge about child dental neglect by different routes. For example, pamphlets regarding the consequences of this issue are helpful and must be displayed in their office. This source should also give valuable information about how to maintain good oral health for children, as an integral part of optimal general health, through proper diet and daily oral hygiene regular dental visits.^[13,14]

Besides dentist health-related professionals, such as trained public health nurses, can provide the family with information to prevent dental caries. Perhaps, their role may be more critical and influential than the dental team due to their closer relationship to the family and having a greater chance to discuss child oral health with parents during their children's preschool age.^[7]

CONCLUSION

It is now clear that some adulthood diseases originate from developmental problems occurring during the childhood years. There is clear evidence that child dental neglect impacts adulthood health regarding the elevated risk of disorders such as malnutrition. The consequence of child dental health may extend to older ages and have major impacts on well-being. Professionals must ensure that the caregiver realizes the nature and extent of the disease and attempts to overcome the barriers of accessing dental services for the child.

Suggestions and Recommendations

- Dentists are in the position to diagnose child dental neglect; thus, more emphasis should be placed on this topic as part of undergraduate dental education.
- It is strongly believed that improving the knowledge of parents toward daily oral health practices as well as the correct feeding habits is essential.
- Educational programs for the public and parents counselling by social workers should be done on regular basis to create awareness regarding dental neglect.
- Graduate and postgraduate educational programs are another way to provide dentists with the features of child dental neglect.
- Physicians as a professional with the highest level of pediatric patients may not diagnose the dental aspects of neglect. Thus, it is also suggested that physicians and dental team should collaborate with each other to maximize prevention, identification, and treatment of dental neglect victims.
- Moreover, the role of establishing public health as an integral part of enhancing community health should not be ignored.
- A clear guideline tool to help nurses distinguish victims of child dental neglect and engage in follow-ups is mandatory.

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